

URBAN DISTRICT OF COLNE VALLEY

ANNUAL REPORT

OF THE

Medical Officer of Health

For the Year 1951

BY

ERIC WARD

M.R.C.S., L.R.C.P., D.P.H.

SLAITHWAITE:
A. T. GREEN & CO., CARR LANE,
1952



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Colne Valley Urban District

LIST OF COUNCILLORS

for the year 1951.

Chairman:

Mrs. M. E. LOCKWOOD, J.P.

Vice-Chairman:

N. H. RICHARDSON, Esq.

Mrs. A. ALLOTT

A. E. BAILEY, Esq.

A. J. BOLTON, Esq.

E. BUMFORD, Esq.

J. CARTER, Esq.

T. P. CLIFFE, Esq.

F. CROWTHER, Esq.

F. L. DAKER, Esq.

H. E. EASTWOOD, Esq.

E. E. FIRTH, Esq.

C. FOSTER, Esq.

G. R. GARSIDE, Esq.

C. L. HODGSON, Esq.

C. HOYLE, Esq.

A. JEBSON, Esq.

N. LUMB, Esq.

J. C. MELLOR, Esq.

R. REDFERN, Esq.

O. SHAW, Esq.

J. E. SYKES, Esq., J.P.

H. WALKER, Esq.

G. WIMPENNY, Esq.

H. E. WOOD, Esq.

PUBLIC HEALTH OFFICERS OF THE COUNCIL

Medical Officer of Health:

ERIC WARD, M.R.C.S., L.R.C.P., D.P.H.

Deputy Medical Officer of Health:

H. C. MILLIGAN, M.B., Ch.B., D.P.H.

Chief Sanitary Inspector and Cleansing Superintendent:

A. SCHOFIELD, C.R.S.I., M.S.I.A.

Assistant Sanitary Inspectors:

D. SUTCLIFFE, M.S.I.A., A.R.S.I.

C. B. MARTIN, M.S.I.A.

W. J. BIRKETT, M.S.I.A.

(Resigned 25-8-51)

H. HANSON.

(Appointed 20-10-51)

Rodent Operator:

G. W. DOBSON.

Divisional Health Office,
Woodville,
Scar Lane,
GOLCAR,
Nr. Huddersfield.

November, 1952.

To the Chairman and Members of the Colne Valley Urban District Council.

Mr. Chairman, Ladies, and Gentlemen,

I have the honour to present to you my 4th Annual Report on the health of the Colne Valley Urban District and the work of the Public Health Department during 1951.

The Report is the 14th in the series since the formation of the cularged Urban District in 1938.

The Report includes in Section VII particulars relating to the Preventive Medical Services provided in the District by the West Riding County Council as the Local Health Authority.

The Vital Statistics show that in spite of a natural increase in population of 16 the Registrar-General's mid-1951 estimate is 90 less than that of a year ago. The Birth Rate of 16.04 per 1,000 population shows a continued slightly upward trend and is higher than the national rate, which is 15.5 per 1,000 population.

The Death Rate of 13.51 per 1,000 population shows a slight fall from last year's figure of 13.95 and is mainly accounted for by the decrease in the number of deaths from diseases of the heart and circulatory system.

There was a considerable increase in the incidence of mild cases of Scarlet Fever and of Measles, the latter cases being in the main a continuation of the epidemic which commenced to spread throughout the district in the autumn of 1950.

The work of the Council as a Sanitary Authority continues to increase under the able guidance of your Chief Sanitary Inspector. Substantial progress has been made with the close co-operation of the trade in raising the standard of hygiene in relation to the preparation and sale of food in the District. Difficulties in connection with the maintenance and repair of old property continue and there seems to be little prospect of an early solution.

The statistics given in the Report record the work of all members of the staff of the Health Department, and I wish to thank them for their unfailing loyalty and support. To Mr. A. Schofield, the Chief Sanitary Inspector, my particular thanks are due for his invaluable help and loyal co-operation.

In conclusion, I wish to express my thanks to you, Mr. Chairman and Councillors, for your continued support and to record my appreciation for the assistance and consideration which is always available from the Clerk and other Officials of the Council.

I am, Mr. Chairman, Ladies and Gentlemen, Your obedient servant,

ERIC WARD,

Medical Officer of Health.

SUMMARY OF STATISTICS

1. General Statistics.

Area in Acres Enumerated Populate Registrar-General's E Registrar-General's E Number of Inhabited Rateable Value (31st Sum represented by a	ion (C Estimat Estimat I Hous March	ensus, e of F e of F es (Manda)	1951) Populat Populat arch, 1 2)	tion (mid tion (mid 1952)	dle of 195 dle of 195	(0) 1)	16,052 22,184 22,180 22,090 7,858 34,377 £527
2.	Extr	acts fi	rom V	ital Statis	stics.		
Live Births: Legitimate Illegitimate	•••			Male 172 6	Female 163 3	Tota 335 9	1
Total				178	163	344	
Crude Birth Rate per Adjusted Birth Rate p	r 1,000 per 1,00	of es	stimate estimat	d residen ed resider	t population t populati	on	15.57 16.04
Still Births:				Male	Female	Tota	1
Legitimate		• • •		8	2	10	
Illegitimate	• • •	•••	• • •				
Total	* * *			8	2	10	
Rate per 1,000	of to	tal (li	ve and	still) bir	ths: 28.25		
Deaths: Males 163, F Crude Death Rate pe							328
Adjusted Death Rate Deaths from Puerpers	per 1,0 al Cau	000 of ses	estima 	ted reside	nt populat		14.85 13.51 2
Adjusted Death Rate	per 1,0 al Cau	000 of ses	estima 	ted reside ar of age:	nt populat	ion 	13.51
Adjusted Death Rate Deaths from Puerpers	per 1,0 al Cau	000 of ses	estima er 1 yea	ted reside	nt populat		13.51
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Section 1.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA NATURAL AND SOCIAL CONDITIONS OF THE DISTRICT

The District is varied in character. Industrial communities occupy the Valley whilst small hamlets and scattered farms are found on the uplands which lie on each side and at the head of the valley.

The principal industry of the District is the manufacture of textiles. Quarrying and agriculture also provide employment for a fair number of persons.

VITAL STATISTICS

Population

The Registrar-General's estimate of the population at mid-1951 was 22,090, as compared with 22,180 at mid-1950. This decrease, together with the increase of 16 births over deaths shows that some 106 people have moved to other areas.

Comparability Factors

Area comparability factors in respect of Births and Deaths have been supplied by the Registrar-General, and for your district these are 1.03 and 0.91 respectively. These are factors by which the crude birth and death rates should be multiplied in order to make them truly comparable with the rates for other areas.

The need for such adjustment is occasioned by the differences in the constitution of area populations as regards the proportions of their sex and age group components. The fact that your district has a comparability factor of 0.91 for deaths shows that the population contains a higher proportion of elderly people than the average area, which would in all probability result in a high crude death rate, despite the general health conditions of the population being good. The factor of 1.03 for births shows that the proportion of women in the maternal age groups is less than in the average area.

Births

After adjustment for inward and outward transferable births, a net total of 344 live births (178 male, 166 female) was registered in the District during the year, an increase of 1 compared with the previous year.

The ADJUSTED BIRTH RATE is 16.04 per 1,000 of the population, as compared with 15.92 for the previous year, 15.5 for England and Wales, 16.1 for the West Riding Administrative County, and 15.9 for the Aggregate West Riding Urban Districts.

The Illegitimate Live Births numbered 9, or 2.62% of the total live births, a decrease of 4 compared with 1950.

Stillbirths

After adjustment for transfers, 10 stillbirths were registered during the year as compared with 9 for the previous year. This figure gives a rate of 28.25 per 1,000 live and stillbirths and 0.45 per 1,000 of the population as compared with 25.57 and 0.41 respectively for 1950.

Deaths

After correction for inward and outward transferable deaths, the net total deaths registered in and assigned to the District was 328 (163 male, 165 female), a decrease of 12 compared with the total for the year 1950.

The ADJUSTED DEATH RATE is 13.51 per 1,000 of the population as compared with 13.95 for the previous year.

The following were the principal causes of death in order of frequency:—

(i)	Diseases of the Heart	and Circulatory	System		114
(ii)	Malignant Neoplasms		• • •		56
(iii)	Intra-Cranial Vascular	Lesions			50
(iv)	Respiratory Diseases Tuberculosis	excluding	Pulmon	ary	35

These 4 causes accounted for 77.74% of the total deaths. Particulars of the various causes of death and of the age and sex distribution are given in the following table:—

	1	All	. 1	_				05	25	45	55_	65-	7.5-
Causer of Death	Sex	Ages		1-		b-	10-	23			31	57	48
All Causes	M F	163 165	6		1		1	1	6	13 10	26	40	77
1 Tuberculosis, respiratory	M	1 2					ï	••••	1	1			••••
2 Tuberculosis, other	M		••••		,						••		1
3 Syphilitic disease	M	1						••••		1	••••		
4 Diphtheria	F M							••••		••••		••••	
5 Whooping Cough	FM												
6 Meningococcal infec-	FM	1											
tions 7 Acute poliomyelitis	F)	••••							•••
0.24	F					• • • •		****					
	F					••••			,		1		
9 Other infective and parasitic diseases	M F	1 1			••••	••••			1				••••
10 Malignant neoplasm, stomach	M F	5				••••				1	1		3
11 Malignant neoplasm, lung, bronchus	F	1			••••				i	1	2	1	••••
12 Malignant neoplasm, breast	M	7									 4		3
13 Malignant neoplasm, uterus	M F	4		••••					1	• • •	2	 1	
14 Other malignant and lymphatic neoplasms	M F	20	•••		1		1			2	6	6 5	4
15 Leukaemia, aleukaemia	M	1	••••				•••				1		
16 Diabetes	F M		••••			••••		••••				• • • • •	••••
17 Vascular lesions of ner-	F M	$\begin{array}{c} 4 \\ 24 \end{array}$	••••					•••	••••		3	2 11	10
vous system 18 Coronary disease,	F M	26 24	• • • •					••••	1	3	2 4	6 9	15
angina 19 Hypertension with	F M	8 2	••••			•••				1	2	2	3
heart disease 20 Other heart disease	F	5 31			•••	•••	1	•			1 2	2 13	2 14
21 Other circulatory dis-	F	38	••••			•••			1	1	2	13	21
ease	$^{\prime}$ F	5	••••				••••		••••		••••	2	$\begin{vmatrix} 1 \\ 3 \end{vmatrix}$
22 Influenza	M F	1 4	••••		• • • • • • • • • • • • • • • • • • • •	••	••••				ï	1	3
23 Pneumonia	M F	1 2	1			••••	••••					1	••••
24 Bronchitis	M F	15								1	3	7 3	4 5
25 Other diseases of respiratory system	M F	1								• • •			
26 Ulcer of stomach and duodenum	M	4			****		•••	•••		1	1 2	1	
27 Gastritis, enteritis, and	M F		•••		•••	•••	• • • •		• • • • • • • • • • • • • • • • • • • •		••••		
28 Nephritis and nephrosis	M		•••		••••	• • • •		•••	1		2	1	
29 Hyperplasia of prostate	F M	2	• • • •	• • •	••••			• • •	• • • •		1	1	
30 Pregnancy, childbirth,	F M	••••	•••										
abortion 31 Congenital malforma-	F M	2	1					1	1		• • •		
tions 32 Other defined and ill-	F	2	1 4	• • • •				•••	1				
defined diseases 33 Motor vehicle accidents	F	21	2		••••	•••	•••			1 2	$\frac{2}{2}$	3	7 14
34 All other assides	M F		****			****	•••	***				1	
35 Suicide	M F	2		••••	• • • •		• • •			2	1	1	1
	M F	1	••••				• • • •			1			_
36 Homicide and operations of war	M F				••••	••••	•••	****	•••				1
Confidence and Controllings of the Application of the Application and Application of the	1		1			••••					·		

Maternal Deaths and Mortality.

There were two maternal deaths during the year. One of these was due to renal and cardiac failure with toxæmia, the result of a septic abortion brought about by the perforation of the uterus with a sharp instrument. The other death was due to heart failure and intestinal stasis following caesarian section. Both deaths occurred in hospital.

These deaths give the District a mortality rate of 5.65 per 1,000 live and still births.

Infant Mortality.

After correction for transferable deaths, there were 10 deaths (6 male, 4 female) of infants under 1 year of age. Of these deaths, 5 of the infants were under 4 weeks of age at the time of death.

The INFANT MORTALITY RATE is 29.07 per 1,000 live births as compared with 26.24 for the previous year.

The death rate amongst legitimate infants per 1,000 legitimate live births is 29.85 as compared with 27.27 for the year 1950.

There were no deaths of illegitimate children under 1 year of age.

Comparative Statistics.

BIRTH RATE Per 1,000 estimated population (crude) do. (adjusted)	Colne Valley Urban District 15.57 16.04	Aggregate West Riding Urban Districts 15.6 15.9	West Riding Admin. County 15.8 16.1	England and Wales (provisional figures)
DEATH RATES All per 1,000 estimated population	14.85 13.51 0.18 0.14 0.04	13.5 13.6 0.11 0.24 0.04	12.7 13.2 0.10 0.24 0.04	12.5 * 0.28 0.04 * 1.96
Heart and Circulatory Diseases	5.16	5.10	4.72	*
INFANT MORTALITY	29.07	30.8	31.8	29.6
DIARRHOEA Deaths of infants under 2 years of age per 1,000 live births	Nil	*	*	*
MATERNAL MORTALITY Puerperal Sepsis Other Causes Total	2.82 2.83 5.65	* * * 0.81	* * 0.93	. * * 0.79

^{*} Figures not available.

Section II.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

Staff

The Medical Officer of Health is a part-time officer of the Council but is engaged whole-time on public health work, being also Medical Officer of Health for the Urban Districts of Denby Dale, Holmfirth, Kirkburton, and Meltham, and Divisional Medical Officer for Division 20 of the West Riding, which is composed of the 5 Urban Districts of which he is Medical Officer of Health.

In addition to the Medical Officer of Health the staff consists of a Chief Sanitary Inspector who is also the Cleansing Superintendent, 3 District Sanitary Inspectors, and a clerical staff of two.

Laboratory Facilities

All the bacteriological laboratory work required to be undertaken by the Health Department and by General Practitioners is carried out at the Wakefield Laboratory of the Public Health Laboratory Service, whilst samples of water for chemical examination are sent to the laboratories of Messrs. Richardson and Jaffe, Public Analysts, Bradford.

Ambulance Facilities

(a) Cases of Infectious Diseases.

The ambulance of the Isolation Hospital to which the patient is admitted is used for the removal of the patient.

(b) Cases of Sickness and Accident.

An Ambulance Service is operated by the West Riding County Council, the Colne Valley Urban District being in Ambulance Area No. 16. The principal depot for the area is situated at Huddersfield.

Professional Nursing in the Home.

General: Home Nursing is undertaken by 3 Home Nurses employed by the West Riding County Council and resident at Golcar, Marsden and Slaithwaite.

Midwifery: There are 2 whole-time midwives employed by the West Riding County Council who are stationed at Golcar and Slaithwaite. A relief nurse/midwife is also resident at Marsden.

Further details of the nursing services provided in the area will be found in Section VII of this report.

Treatment Centres, Clinics, and Hospitals.

Infant Welfare Centres.

Held weekly on Tuesday afternoon at Linthwaite, Wednesday afternoon at Golcar and Slaithwaite, and on Thursday afternoon at Marsden.

Ante-Natal Clinics.

Held as follows:

Golcar: 2nd and 4th Monday morning in the month.

Slaithwaite: 2nd Wednesday morning in the month. This has been changed to the 1st Monday afternoon in the month as from the 1st January, 1952.

School Clinics.

No special School Clinics are held in the District but school-children are seen at all Infant Welfare Clinic Sessions.

All these clinics are held in the following premises:—

Linthwaite: Grove House, Linthwaite.

Golcar: Woodville, Scar Lane, Golcar.

Marsden: Conservative Club, Marsden.

Slaithwaite: Central Hall, New Street, Slaithwaite.

Chest Clinic.

Held daily at 1, Peel Street, Huddersfield, but a prior appointment is necessary.

Venereal Diseases Clinics.

Held at York Place, New North Road, Huddersfield; Clayton Hospital, Wakefield; and the General Infirmary, Dewsbury.

Hospitals.

(a) Infectious Diseases:

Under the National Health Service Act, Colne Valley is placed in the Leeds Regional Hospital Area, and cases of infectious diseases, other than smallpox, are admitted to the Mill Hill Isolation Hospital, Huddersfield.

Until the end of the year, accommodation for cases of Smallpox was provided by the Regional Board at Cottingham Smallpox Hospital, Cottingham, East Yorkshire. As from the 1st January, 1952, however, accommodation is provided at the Oakwell Smallpox Hospital, Birstall.

(b) General Hospitals.

Huddersfield Royal Infirmary. Staincliffe General Hospital, Dewsbury. Deanhouse Hospital, Thongsbridge, Holmfirth.

(c) Maternity:

Arrangements are made for the admission of patients to the Princess Royal Maternity Home, Huddersfield, and various General Hospitals.

SANITARY CIRCUMSTANCES OF THE AREA

Water Supply

The Huddersfield Corporation are the Statutory Water Undertakers for the Colne Valley area with the exception of Scammonden, a widely scattered hamlet of approximately 115 houses to the north of the District.

The water mains of the statutory body by no means cover the whole area, and water is supplied to various properties from many other sources. In Marsden, water is supplied to 209 houses by firms having works in that area, and by the Council to one of its housing estates comprising 144 houses. The work of transferring 144 houses, included in the 209, to the Huddersfield Corporation mains has been proceeding slowly during the year and should be completed during 1952. There have been periods of shortage in the water supply to the Council's estate and negotiations to transfer this estate to the Corporation's mains were proceeding at the end of the year.

In Slaithwaite, 913 properties are supplied with water by the Dartmouth Estate. In Linthwaite, the work of transferring 40 houses supplied by a firm of manufacturers to the Corporation's mains has been going on during the year and should be completed during 1952.

In addition to these main private supplies there are in the area innumerable small private supplies serving groups of from 20 houses down to single dwellings. Many of these supplies are unsuitable for domestic purposes, but they are the only water supplies available, and a piped water supply into the houses is not possible until there are some considerable extensions of the Statutory Undertakers' mains.

A total of 25 samples of water were taken during the year for bacteriological examination, 12 being reported as satisfactory and 13 as unsatisfactory. Investigations into the sources of pollution in connection with the unsatisfactory samples were still proceeding at the end of the year, the samples being from places where no public main is available. Two samples from the Council's private supply were examined for plumbo-solvency and found to be satisfactory.

Drainage and Sewerage.

Large parts of the District are still not sewered, and use of the water carriage system in these parts is very limited. The small sewage plant in course of erection for a hotel at the end of 1950 has been completed and 3 further plants have been completed during the year. The Consulting Engineers have almost completed the scheme for the provision of a trunk sewer for the District, and when this is laid and the necessary branch sewers are provided it should be possible to extend the water carriage system to other parts of the District. During the year 17 inspections of sewers were made and 2 nuisances remedied.

Closet Accommodation

The conversion of privies, tub and pail closets to water closets has been continued during the year and 45 privies and 18 pail closets have been abolished. The work is proceeding very slowly owing to labour difficulties and many more conversions have been in the hands of contractors for some considerable time.

The following is a summary of the sanitary accommodation at the end of the year:—

No. of flushed water close	ts	 	 • • •	5816
No. of waste water closets .				
No. of privies				
No. of tub or pail closets .				
No. of standard dustbins .				
No. of ashpits		 	 	348

Public Cleansing

The alternate weekly collection of refuse and salvage has been continued during the year together with the weekly emptying of tub and pail closets. The work of emptying privy contents has been considerably improved during the year under review, and the incentive bonus scheme has borne fruit with the result that monthly emptyings have been possible and maintained for the greater part of the year.

The following is a summary of the work carried out during the year:—

Average No. of dustbins emptied per week		3385
Average No. of privies cleansed per week		163
Average No. of ashpits emptied per week		94
Average No. of tub or pail closets emptied per week	k	362

Refuse Disposal

Controlled tipping accounts for 98% of the total dry refuse (including privy contents) disposed of, the remaining 2%, mainly trade refuse of a putrescible character, being burned at the Destructor Plant.

Tub and pail contents, collected by nightsoil tank, are discharged into the detritus chambers at the Slaithwaite and Golcar Sewage Works.

The following figures give the cost of the refuse collection and disposal services for the year ending 31st March, 1952, together with the income for the same period:—

							Nett
	Expe	endi	ture	In	com	e	Expenditure
	£	s.	d.	£	s.	d.	£ s. d.
Refuse Collection	 7370	1	4	513	1	2	6857 0 2
Salvage Collectio n	 3820	7	7	4800	18	3	980 10 8 Cr.
Refuse Disposal	 1515	4	7	98	9	8	1416 14 11
							
	12705	13	6	5412	9	1	7293 4 5

Shops Act.

The good relations between the owners and the department have been maintained, and improvements in shop sanitation are being carried out. During the year 78 visits were made to shops, 6 defects were recorded and one remedied.

Smoke Abatement.

During the year 24 half-hourly smoke observations were recorded and in no instance was the Smoke Abatement Byelaw contravened.

The majority of the manufacturers in the area are always ready and willing to co-operate with the department in reducing atmospheric pollution and the provision of an additional boiler together with conversion from hand firing to mechanical stokers on the existing boilers of one firm has done much to eliminate excessive smoke from this works. The gradual change over from hand firing to mechanical stokers is proceeding throughout the District with beneficial results from a smoke abatement standpoint, whilst in domestic premises an increasing number of smokeless fuel appliances are being installed.

Regulated Buildings and Offensive Trades.

There are two offensive trades carried on in the district, one Soap Boiler, and one Gut Scraper, and 24 visits have been made to these premises, which on each occasion were found to be satisfactory. Considerable improvements in accommodation and plant have been carried out at the Gut Scraper's premises during the year.

Eradication of Bed Bugs.

No instances of infestation with bed bugs have been reported or found during the year.

Schools.

There are in the District 20 schools, 12 being County Schools including 1 Secondary Modern School, and 8 being Voluntary Schools. The buildings generally are kept in a reasonable state of repair, but there has been very little improvement in the condition of the sanitary accommodation and the provision of wash-basins during the year, and these particular features in many schools are far from satisfactory. A survey of school premises was commenced towards the end of the year and this when completed should provide a complete picture of the sanitary circumstances.

Sanitary Inspection of the Area.

Record of Inspections and Results.

		Nuisances		Nuisances
Inspections made	No. of	or defects	No. of re-	or defects
in respect to	Inspections	found	Inspections	remedied
Public Health Act:—			•	
Housing	168	216	452	209
Other Nuisances	240	189	476	143
Water Supply	154	22	45	13
Overcrowding	22		_	
Sanitary Accommodation	:			
W.Č.'s	161	32	355	31
Privies	192	74	627	47
Tubs and Pails	85	44	281	10
Ashes Accommoda-				•
tion	138	96	164	113
Drains:—				110
Inspected	431	32	211	31
Tested	670	13	2	-
Accumulations	14	13	10	9
Swine, Fowl and Other			A (/	J
Animals	5			
Shop Premises — Shops				
Act	7.4	6	4	1
Rodent Control (Visits			7	1
by Inspectors)	52	2	36	
,		~	30	-

Other Visits:-

Respecting Infectious Diseases	500	
Respecting Disinfections	148	
Respecting Schools, Public Buildings, etc	39	
Respecting Sewers, Cesspools, etc	30	
Miscellaneous Visits	541	
Interviews — Owners, Contractors, etc	853	
Informal Notices Served 370 Complied with		315
Statutory Notices served 15 Complied with		6

Factories Act, 1937.

The following is an extract from the report to the Director of Statistics of the Ministry of Labour on Form 572 (Revised).

1. Inspections for Purposes of Provisions as to Health.

Premises.	No. on Register	Insp't'ns	Written Notices	
(I) Factories in which Sections I, 2, 3, 4, and 6 are to be enforced by	22			
Local Authorities. (2) Factories not included in (1) in which Section 7 is enforced by the	33	4		
Local Authority. (3) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers'		151	13	
premises).	4	_	_	
Total	177	165	13	

2. Cases in which Defects were Found.

Particulars	Found	Remed'd'	Referred by H.M Inspector	Prose- cutions
Want of cleanliness: Sanitary conveniences	6	4	1	
(a) Insufficient (b) Unsuitable or	4	1	-	
defective Other offences against	26	15	1	materials
the act.	3			-
Total	39	20	2	

3. Outworkers.

There are in the District 60 outworkers, employed in burling and mending by various textile firms, and one in the making of paper bags.

Prevention of Damage by Pests Act, 1949

A part-time operator is employed by the Council on this work and during the year 81 complaints of rodent infestation were received, 805 visits were made and 66 premises treated. The estimated number of rats destroyed was 1863 and the number of mice destroyed was 312.

A test bait of the sewers was carried out, 46 manholes being baited of which 22 showed evidence of infestation.

A sewer maintainance treatment was carried out during the year, 189 manholes were pre-baited, there were 69 poison takes, and the estimated number of rats destroyed was 138.

Statistical Return.

	Local Authority Owned	Dwelling Houses	Agricul- tural	All other (including Business & Industrial)	Total
1. Total number of properties in Local Authority's District	35	7,682	120	638	8,475
2. Number of properties inspected by the Local Authority during 1951 as					
a result (a) of notification or (b) otherwise	(a)— (b)31	5	16	14	100
found to be infested	Major 13 Minor 8	4 27	1	2	20
4. Number of properties (under 2) found to be seriously infested with mice		. 2			2
5. Number of infested properties (under 3 and 4) treated by the Local Authority	21	33	1	11	66

HOUSING

There is a saying that "The Englishman's Home is His Castle," but this is very poor consolation for the family which has been on the Council's waiting list for many years and is still without accommodation, and there are many who must feel that owing to sanitary defect and disrepair their "castle" is in constant danger of falling about their ears. The problem of the re-conditioning of privately-owned houses is ever in the forefront in the Health Department and it is most regretable to see houses gradually falling into decay because their owners cannot afford maintenance costs from the uneconomic rents being received.

Owing to labour difficulties progress in the erection of Council houses has been very slow and only one house has been built by private enterprise during the year.

Action has been necessary under Sections 11 and 12 of the Housing Act to prevent re-letting of totally unfit houses from which the Council have re-housed the tenants; 3 Demolition Orders were made and 6 houses were closed on Undertakings during the year. Two houses were made fit after official Representation had been made to the Council as to their disrepair.

Particulars required by the Ministry of Health are set out below:—

Total number of inhabited houses in the Urban District ... 7,858

Number of new houses erected during the year:—

By private enterprise	 • • •	 	1
By Local Authority	 	 • • •	58

The principal work done under the Housing Act, 1936, can be summarised as follows:—

Inspections:-		Primary	Re-visited
Part 1.	Clearance Areas		5
	,, ,, Other Visits	36	4
Part 2.	Section 9 — Reconditioning		
	Sections 11/12—Demolition or Closure	88	37

Housing Statistics

1. Inspection of Dwelling-houses during the year:—

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	453
(b) Number of inspections made for the purpose	1001
(2) (a) Number of dwelling-houses (included under subhead (i) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	54

(b) Number of inspections made for the purpose ...

88

		20. 2	
	(4)	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	275
2.	Noti	edy of Defects during the year without Service of Forma	ıl
	quei	nber of defective dwelling-houses rendered fit in consence of informal action by the Local Authority or their ers	188
3.	Acti	on under Statutory Powers during the year:—	
	(1)	Housing Act, 1936, Sections 9 and 10	Nil
	(2)	Public Health Acts—	
		Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	4
		Number of dwelling-houses in which defects were remedied after service of formal notices	2
	Proc	eedings under Sections 11 and 13 of the Housing Act,	1936: —
	(1)	Number of representations, etc., made in respect of dwelling-houses unfit for human habitation	12
	(2)	Number of dwelling-houses in respect of which Demolition Orders were made	3
	(3)	Number of dwelling-houses demolished in pursuance of Demolition Orders	1
	(4)	Number of dwelling-houses closed on undertakings (not demolished)	6
	(5)	Number of dwelling-houses made fit on undertakings	2
	Proc	ceedings under Section 12 of the Housing Act, 1936:—	
	(1)	Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil
	(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil
4.	Но	using Act, 1936 — Part IV — Overcrowding:—	
ge	sition neral	In the absence of a census it is impossible to assess the with regard to overcrowding with any degree of accurate action is possible, but special cases brought to notice a opportunity arises.	cv. No

Number of dwelling-houses found to be in a state

so dangerous or injurious to health as to be unfit

for human habitation

22

(3)

During the year 5 new cases of overcrowding were recorded, and 8 cases were abated.

From observations and information obtained during the year it would appear that the percentage of Legal Overcrowding in Colne Valley is fairly low, but that the application of the bedroom standard to the same houses would show marked overcrowding in a large number of cases. Special visits in connection with 22 cases of alleged overcrowding revealed only 2 cases of legal overcrowding.

INSPECTION AND SUPERVISION OF FOOD

Milk Supply.

An increasing amount of heat treated milk is now sold in the District, the supply being now almost equally divided between heat treated and non-designated milk produced by local producer/retailers. A small amount of locally produced and imported Tuberculin Tested milk is also sold. The number of retail purveyors of milk (exclusive of producer/retailers) is 15, including 3 dairies, 10 shops selling bottled milk only and 2 distributors with premises outside the District. The number of producers selling their milk to firms with pasteurising plants in neighbouring districts is gradually increasing with a corresponding drop in the number of producer/retailers.

During the year 14 samples of milk were submitted to the Public Health Laboratory Service for "Methylene Blue" test, 9 being reported as satisfactory and 5 as unsatisfactory.

A total of 12 samples of milk were submitted to the Public Health Laboratory Service for examination for tubercle bacilli, with negative results.

Milk (Special Designation) Regulations, 1939-49.

The following licences were granted by the Council during the year:—

1.	Dealers' licences to retail Tuberculin Tested milk	7
2.	Dealers' licences to retail Pasteurised Milk	9
3.	Supplementary licences to retail Tuberculin Tested milk	2
4.	Supplementary licences to retail Pasteurised Milk	2
5.	Dealers' licences to retail Sterilised milk	11
6.	Dealers' licences to retail Tuberculin Tested/Pasteurised Milk	1

Ice Cream.

There are no large manufacturers of ice cream in the district, but seven small retailers manufacture a complete cold mix. In addition to these, 41 premises retail pre-packed ice cream supplied from outside the district. Seventy-six visits have been made to ice cream premises during the year and advice given with regard to personal hygiene and clean food production and handling methods. During the year 25 samples of ice cream have been taken and submitted for examination. Of these, 15 were classified as Grade 1, 4 as Grade 2, 5 as Grade 3, and 1 as Grade 4. The provisional grades of ice cream are as follows:—

rade 1. The provisional	6.44.4
Provisional Grade.	Time taken to Decolourise Methylene Blue.
1	$4\frac{1}{2}$ hours or more.
2	$2\frac{1}{2}$ to 4 hours.
3	$\frac{1}{2}$ to 2 hours.
4	0.

Numerous factors and experimental errors of laboratory tests make it necessary for judgment to be based on a series of samples. Over a period, 50 per cent. should fall into Grade 1; 80 per cent. into Grades 1 and 2; not more than 20 per cent. into Grade 3; and none into Grade 4.

Food Preparing Premises.

A total of 40 premises have been registered in accordance with Section 14 of the Food and Drugs Act, 1938, for the preparation or manufacture of sausages or potted, pickled, or preserved food intended for sale, and during the year 146 visits have been made to these premises. The standard of the premises is gradually being raised with the excellent co-operation of the food traders and the department. Attention during the year has also been directed to the handling of food in "general food premises" and 228 visits have been made to these premises, advice given, and facilities for the washing of hands (including running hot and cold water) obtained. During the year Byelaws covering the Handling, Wrapping, and Delivery of Food and Sale of Food in the Open Air have been adopted.

Meat.

There is one public abattoir, one licenced, and ten registered slaughterhouses in the district, the use of which has been suspended since the outbreak of war, with the exception of occasional use for slaughtering under licence.

The number of men licenced to slaughter animals in accordance with the Slaughter of Animals Act, 1933, is 39.

Carcases Inspected and Condemned.

	Cattle]	Sheep	
	ex'd'g			and	
	Cows	Cows	Calves	Lambs	Pigs
Number killed (if known),	_				294
Number inspected		_		_	279
All diseases except Tuberculosis					
Whole carcases condemned	_				_
Carcases of which some part					
or organ was condemned		-			
Percentage of number inspect-				1	
ed affected with disease other					
than Tuberculosis				-	
Tuberculosis only					
Whole carcases condemned					1
Carcases of which some part					-
or organ was condemned		_	-		10
Percentage of number inspect-					
ed affected with Tuberculosis					3.94%
Total Weight Condemned					421 lbs

In order to carry out this work, 31 visits were made to the Public Abattoir, 54 to private slaughterhouses and 7 to private premises, a total of 389 meat and food inspections being made in all.

Bread and Confectionery.

There are in the District 20 bakehouses, none of them underground, of which 26 inspections were made during 1951.

Surrender of Other Foods.

						lbs.
Tinned	Fruit					$17\frac{1}{4}$
,,	Peas					1
"	Milk					$25\frac{1}{2}$
"	Toma	toes				$3\frac{3}{4}$
, ,	Soup					3
, ,	Beans	S		• • •		2
,,	Meat					574
,,	Fish		• • •			$99\frac{3}{4}$
Butter						40
Bacon						1
Cheese			• • •			$20\frac{1}{2}$
Chicke	n				• • .	2
		To	otal W	eight		7893

Food and Drugs Act, 1938.

The West Riding County Council is the authority responsible for the Food Adulteration Section of the Act. The following particulars of samples taken during the year have been supplied by the Chief Inspector of Weights and Measures:—

		Genuine	Adulterated
Milk Samples examined	 	66	-
Drugs examined	 • • •	1	
Other Foods examined	 	15	delarane
Proceedings instituted	 		_
Cautions issued	 		

The clean food campaign has been continued, and the Chief Sanitary Inspector has addressed various organisations in the district on clean food methods.

Section VI.

PREVALENCE AND CONTROL OF INFECTIOUS AND OTHER DISEASES

The year has been notable for the considerable increase in the number of cases of Scarlet Fever and Measles and for an outbreak of Sonne Dysentery affecting chiefly the Marsden Ward.

Smallpox.

No cases of Smallpox were notified in the District during the year.

Diphtheria.

During the year 3 cases of Diphtheria were notified but after admission to hospital the diagnosis was not confirmed in any case.

Supplies of Anti-Toxin for the treatment of suspected cases and contacts are obtainable by medical practitioners through the hospital service, stocks being held at the Mill Hill Isolation Hospital, Huddersfield, and the Huddersfield Royal Infirmary. Diphtheria Prophylactic for immunisation can be obtained by medical practitioners on application to the Divisional Medical Officer.

The immunisation campaign continued during the year, the inoculations being carried out by medical practitioners and officers of the County Health Department. Some 4 children of school age and 249 children under 5 years of age received a complete course of injections, whilst 130 children who had been inoculated some years ago received "booster" doses.

Further particulars of immunisations carried out and the immunisation state of the area will be found in Section VII of this report.

Scarlet Fever.

During the year 107 cases of Scarlet Fever were notified, 106 of which were confirmed, as compared with 41 in the previous year. Although the disease was mild in character in most of the cases, 97 of the patients were admitted to Mill Hill Isolation Hospital.

The distribution of the cases in the various wards is shown in the table given below:—

Ward	Jan.	Feb.	Mar.	Apr.	May	Jun.	July	Aug.	Sept	Oct.	Nov	Dec.	T't'I
North-East (Golcar) South-East	1	4	3	3	2	3	2	4	1	1	3	1	28
(Linthwaite) West	1	1	3	3		2	-	1	_	2	1		14
(Marsden) North	4	1		1	3	3	1	1	1	2	1	1	19
(Scammonden) Central				-					-		-	-	_
(Slaithwaite)			1	1	3	14	4	4	7	2	5	4	45
Totals :	6	6	7	8	8	22	7	10	9	7	10	6	106

Whooping Cough.

During the year 138 cases of this disease occurred as compared with 195 in the previous year. The distribution of the cases is given in the following table:—

Ward	Jan.	Feb.	Mar.	Apl	May	June	July	Aug.	Sept	Oct	Nov.	Dec.	Tot'l
Golcar	1	3	5	<u> </u>		_	5	17		14	1	_	46
Linthwaite	-	1	-		_		1	-	2	7	1	3	15
Marsden	_	-	1	1	-	2	-	3	8	23	21	16	75
Scammonden	_	-	-	-					_	_			
Slaithwaite	1	-	-	-	-	_	_	_	_	1	_	_	2
Totals	2	1.	0	1	-	2	6	20	10	45	23	19	138

Measles.

A total of 529 cases of measles were notified during the year as compared with 118 in the previous year. The cases were widespread throughout the District and the incidence greatest during the months of February, March, and April. The distribution of cases is shown in the following table:—

Ward	Jan.	Feb.	Mar.	Apl.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	Tot'l
North-East													
(Golcar)	28	73	51	4	2	1	8		1	2	3	1	174
South-East	1.1	1 7	1.1	10	1				9	9.0		}	00
(Linthwaite) West	11	17	11	12	1	_	_		3	32	2		89
(Marsden)	11	13	80	36	10	2		_	-	1	1 —	_	153
North							ı						
(Scammonden)	-	_	-		-		-	_	_	-	_	-	-
Central (Slaithwaite)	4	2	50	39	5					2	111	_	113
(Statellwarte)													
Totals	54	105	192	91	18	3	8	-	4	37	16	1	529

Acute Primary and Acute Influenzal Pneumonia.

There were 29 cases of Acute Primary Pneumonia and 5 cases of Acute Influenzal Pneumonia notified during the year as compared with 14 cases and 2 cases respectively for 1950.

Deaths registered in 1951 as due to all forms of Pneumonia totalled

3 as compared with 10 in the previous year.

The distribution of cases is given in the table shown below:—

Ward	Jan.	Feb.	Mar.	Apl.	May	June	July	Aug.	Sep.	Oct	Nov	Dec.	T'tal
North-East (Golcar) South-East	l _k	3	4		-	1		1		_		4	17
(Linthwaite)	—	1		-		1			_	1	_		3
West (Marsden)	_	3		3	3	1	_	_	-	2		1	13
North (Scammonden)	_		den au		_		-	_	-	_	_		
Central (Slaithwaite)	_	_				1				_			1
Totals	4	7	4	3	3	4	_	1	_	3		5	34

Enteric Fever and Dysentery.

During the year 32 cases of Sonne Dysentery were notified, all of which were confirmed. In addition 4 cases, originally notified as cases of food poisoning, were finally diagnosed as sonne dysentery. Of these cases 34 occurred in Marsden and one each in Golcar and Slaithwaite. None of the cases were admitted to hospital and there were no deaths recorded as attributable to this disease.

No cases of Enteric Fever were notified.

Food Poisoning.

During the year 5 cases of food poisoning were notified, but in only one case was the diagnosis confirmed. Full details of the case will be found on Page 5a of Section VII of this report.

Erysipelas.

There were 12 cases of Erysipelas notified during the year as compared with 5 in 1950. Of these cases, 4 were resident in Linthwaite, 5 in Marsden, and 3 in Slaithwaite.

Meningococcal Infections.

Three cases of meningococcal infection were notified, all of which were confirmed. All were admitted to hospital where one of the patients, a child aged 6 months, unfortunately died. The other children were aged 2 years and 3 years and both made satisfactory recoveries.

Post-infectious Encephalitis.

One case of encephalitis following measles was notified. The patient, a child aged 5 years resident at Slaithwaite, was admitted to Mill Hill Isolation Hospital, where she made a satisfactory recovery.

Acute Poliomyelitis and Acute Polioencephalitis.

During the year 2 cases of Acute Poliomyelitis were notified, one of which was confirmed, as compared with 2 cases in 1950. The confirmed case was a child aged 3 years resident in Golcar. The child was isolated at home, where she made satisfactory progress.

No deaths were recorded as due to this disease.

Puerperal Pyrexia.

No cases of this condition were notified during the year.

Cancer.

The number of deaths attributable to Cancer during the year totalled 56 (28 male, 28 female), the same number as in 1950. The Cancer death rate for the year is 2.54 per 1,000 of the estimated population compared with a rate of 2.52 for the previous year. The corresponding rates for the Administrative County and the Aggregate Urban Districts are 1.80 and 1.89 respectively.

Tuberculosis.

A total of 25 new cases of Tuberculosis was added to the Notification Register during the year, as compared with 22 in the previous year.

A total of 4 deaths (1 male, 3 female) from Tuberculosis was recorded during 1951, as compared with 8 in the previous year.

The following tables give details of the number of cases on the Notification Register, together with particulars of new cases of Tuberculosis and deaths from Tuberculosis during the year:—

	Pulm	nonary	Non-Puli	monary
	Male	Female	Male	Femal e
(a) Number of cases on Register at commencement of year	42	24	22	23
(b) Number of cases notified first time during the year	8	10	4	3
(c) Number of cases restored to Register				
(d) Number of cases added to Register otherwise than by notification	2	quanda		1
(e) Number of cases removed from the Register	7	5	6	5
(f) Number of cases remaining on the Register	45	29	20	22

		New Ca	ses	1		Dea	ths	
Age (years)	Pulmonary Male Female		ary Pulmonary			ionary	Non- Pulmonary	
			Male	Female	Male Female		Male	Female
*0-1 1-5 5-10 10-15 15-20 20-25 25-35 35 45 45-55			 1 - 1 - 1 - 2	1 1 1 1		1 - 1		
55—65 65 and upwards	2 2 -	1				_	_	1
Totals	8	10	4	3	1	2		1

Colne Valley 1951

Table showing Cases of Infectious Diseases notified during the Year

														-
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	Over 65	M			ಬ			1	1		C3			
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	Deaths			1	3(a)	-	-	-	1		1	1	1	
h		a												
nbe	itte	tior		1	1	1	7	3(b)						
Number	in which Admitted Diagno- Mill Hill	firmed Hospital	 	1	ı	1	97	619	,			ಣ	-	
-	4 - C	-1												- /
Number of cases	in which Diagno-	firmed	529	138	29	ಬ	106	ಣ	-	36(c)	12	ī		
Nu	in	sis	10				1					'		
	ber	led												-
Total	Number of cases	Notified	529	138	29	70	107	ಣ	61	32	13	ಣ	- ro	
-	7.07	4												
	43		1	. :	m- 1- 		ver	٥٠٠٠	Poliomyelitis	:		Diphtheria Post-Infections	Encephalitis Food Poisoning	
	Disease		(0)	Whooping Cough	ary Pneu- monia	zal Pneu- monia	Fe	feningococal Infections	nye	ery	las	ria	alitison	
	Dis		Measles	Vhoopin Cough	ary Pr monia	zal Pn monia	rlet	feningocc cal Infections	lion	ente	sipe	the	Po	
			Me	30	ar me Acu	za	Scarlet Fever	Meningococ- cal Infec- tions	Po	Dysentery	Erysipelas	Diphtheria Post-Infect	Encephalitis ood Poisonin	
_											H	HT	<u>E</u>	

(a) deaths from all forms of Pneumonia.
(b) 2 cases admitted to Huddersfield Royal Infirmary.

(c) includes 4 cases originally notified as food poisoning.

SERVICES PROVIDED UNDER PART III OF THE NATIONAL HEALTH SERVICE ACT

PUBLIC HEALTH DIVISION 20

The County Districts forming Division No. 20 are as follows:— Colne Valley U.D. Kirkburton U.D. Denby Dale U.D. Meltham U.D.

Holmfirth U.D.

Area of the Division (in acres) 64,265 Estimated Population (mid-1951) 73,371

Divisional Staff:

Divisional Medical Officer:

E. WARD, M.R.C.S., L.R.C.P., D.P.H.

Deputy Divisional Medical Officer:

H. C. MILLIGAN, M.B., Ch.B., D.P.H.

Assistant County Medical Officer:

(Part Time) D. SHAW, M.B., Ch.B. (Appointed 28th February, 1951)

Clinic Medical Officers:

(Part Time)

G. ASPINWALL, M.B., Ch.B. C. DICKSON, M.B., Ch.B. L. E. LUCAS, M.B., Ch.B. H. MERCER, M.B., Ch.B.

H. C. PICKERING, M.R.C.S., L.R.C.P. J. A. STEPHENS, M.R.C.S., L.R.C.P. J. E. TAYLOR, M.B., Ch.B. M. V. WILBY, M.R.C.S., L.R.C.P.

Superintendent Health Visitor:

Miss A. CORLESS.

Health Visitors and School Nurses:

Mrs. D. ARDRON, Appointed 2-7-51. Miss D. BROOKE.

Miss J. CHAMBERLAIN, Appointed 2-7-51.
Mrs. N. CRANSTON, Resigned 1-4-51.
Miss E. EASTWOOD.

Miss E. EVEREST, Appointed 2-7-51.

* Mrs. E. FISCHER, Appointed 4-4-51. Miss M. FLINTOFF.

Miss R. M. GINDERS.

Miss D. MELLOR, Appointed 22-8-51. Miss M. E. PORRITT, Resigned 31-3-51. Mrs. A. ROYSTON.

* Mrs. M. WARD. Miss D. WOOD.

Mrs. E. M. WOODEND, Resigned 31-3-51.

Senior Clerk:

G. A. BEATSON. * Part Time.

COMPARATIVE STATISTICS.

COMPARATIVE STATISTICS.											
	Colne Valley U.D.	Denby Dale U.D.	Holm- firth U.D.	Kirk- burton U.D.	Mel- tham U.D.	Division No. 20	Aggregate West Riding U.D's.	West Riding Admin. County	England & Wales prov. figures		
Population	22,090	9,607	18,960	17,690	5,024	73,371	1,157,200	1,586,300	*		
Live Births	344	123	256	211	78	1,012	18,031	25,113	*		
Still Births	10	3	6	5	1	25	478	668	*		
Deaths	328	157	291	218	77	1,071	15,616	20,205	*		
Deaths under 1 year of age	10	5	10	3	1	29	555	798	*		
Birth Rate Per 1,000 estimated population (Crude)	15.57	12.80	13.50	11.93	15-53	13.79	15-6	15.8	15.5		
,, (Adjusted)	16.04	13.70	14.04	15.39	15.68	•	15.9	16.1	15.2		
Death Rates All per 1,000 estimated population All Causes (Crude) ,, ,, (Adjusted)	14.85	16.34	15·35 13·19	12.32	15·33 13·64	14.59	13.5 13.6	12·7 13·2	12.5		
Infective and Parasitic diseases excluding T.B. but including Syphilis and other V.D Tuberculosis of	0.18	_		0.11	quadra	0.08	0.11	0.10	*		
Respiratory system	0.14	0.21	0.16	0.28	_	0.18	0.24	0.24	0.28		
Other forms of Tuberculosis	0.04	0.21	0.05	_	_	0.05	0.04	0.04	0.04		
Respiratory Diseases (excluding tuber- culosis of respir- atory system)	1.58	0.73	2.64	1.07	1.39	1.61	1.90	1.81	yt.		
Cancer	2.54	2.71	2.27	2.04	1.79	2.32	1.89	1.80	1.96		
Heart and Circulatory Diseases	5.16	7.29	5.22	4.75	5.37	5.37	5·10	4.72	*		
Vascular Lesions of the Nervous Sys- tem	2.26	2.91	2.85	2.54	2.39	2.58	1.86	1.72			
Infant Mortality	29.07	40.65	39.06	14.22	12.82	28.66	30.8	31.8	29.6		
Maternal Mortality	5 ·6 5	_		-	-	1.93	0.81	0.93	0.79		
Notice that the second											

^{*} Figures not available. 2a

VITAL STATISTICS

Births.

The number of live births registered in the Divisional area during 1951 was 1012 (529 males, 483 females), an increase of 4 compared with the previous year.

The CRUDE BIRTH RATE was 13.79 per 1,000 of the estimated population as compared with 13.58 for 1950.

The illegitimate live births numbered 35 or 3.46% of the total live births, a decrease of 6 compared with the previous year.

Deaths.

The deaths assigned to the Divisional area after correction for transfers were 1071 (558 males, 513 females), an increase of 1 on the total for 1950.

The CRUDE DEATH RATE from all causes was 14.59 per 1,000 of the estimated population as compared with 14.42 for the previous year.

The following were the principal causes of death in order of frequency:—

(i)	Diseases of the Heart an	d Circu	latory	System		395
(ii)	Intra-Cranial Vascular L	esions			• • •	189
(iii)	Malignant Neoplasms		• • •	* * *	• • •	170
(iv)	Respiratory Diseases	(exclud	ding	Pulmor	nary	
	Tuberculosis)					116

These 4 causes accounted for 81.23% of the total deaths.

Infant Mortality.

In 1951 the deaths of infants under one year of age numbered 29, a decrease of 1 compared with the previous year. Of these deaths 18 infants were under 4 weeks of age at the time of death.

The INFANT MORTALITY RATE was 28.66 per 1,000 live births as compared with 29.76 for 1950.

The death rate amongst legitimate infants per 1,000 legitimate live births was 28.66 as compared with 28.96 for 1950.

The death rate amongst illegitimate infants per 1,000 illegitimate live births was 28.57 as compared with 48.78 for 1950.

The following table gives the causes of death of all infants at various ages under one year:—

DEATHS OF INFANTS UNDER ONE YEAR OF AGE.

Total under 1 year	<u>~</u>	~		9	?:	i.~	ಣ				10	56
9-12 months	1			-		1	1	-magilinips deris-		1		
6-9 months	_	1	i		orion and	1	1			1		©1
3-6 months		1	1	1	1				1		G1	, T
1-3 months	1	-	1	¢٤						1	properly	
Total under 1 month				<i>-</i>	¢1	1-	es	p==4		1	5	2
2-4 weeks	1	1		1	1							က
1-2 weeks	1		1	1	1	1			7		1	_
Total under I week			1	,	÷1	•	5.5	1 + 2	1	***************************************	21	1.1
5–7 days	1		1	1	-	63	-	1		1	1	+
2-5 days		1	1	1	-	—	1	1	1	-		Ç1
1-2 days	1		1	1	1	-	7	1			~	25
Under 1 day			1	1	1	ହା		ļ	E	1	proving	<u> </u>
(tuses of Death	Meningococ Infections	Nervous System	Meningitis	4. Pnermoma	5. Congenital Malformations	6. Premature Birth	7. Injury at Birth	8. Intestinal Obstruction and Hernia	9. Accidental Suffocation	10. Intu-susception	11. Other Diseases Peculiar to the First Year of Life	TOTAL

EPIDEMIOLOGY

Food Poisoning.

During the year 5 cases of food poisoning were notified, but in only one case was the diagnosis confirmed. The patient, a male aged 55 years resident in the Colne Valley U.D., was admitted to the Mill Hill Isolation Hospital on the 7th June, and died on the 13th June, 1951.

The main symptom was diarrhoea and in the fatal case there was considerable prostration. A specimen of stool revealed organism S. Typhimurium.

The origin of infection was thought to be cold brisket, but this could not be confirmed as no samples of the food were available for examination. There were no rats or mice in the household and only a few flies. The cooking and storage seemed to be of average standard and there were no other cases in the household or in the district. It was stated that the patient frequently fed the dog by hand when having meals.

It is considered that the cause of death was due to Toxic Nephritis consequent on Acute Enteritis due to Salmonella infection. There was no evidence to show the state of the man's kidneys prior to the onset of infection, but it was considered at the hospital that there was probably some pathological condition of the kidneys antecedent to the infection with Salmonella. Unfortunately this could not be proved as no post mortem was held.

At a Church School in the Kirkburton U.D., 4 scholars were sick within a few minutes of consuming a school meal. Food poisoning was suspected but after investigation this did not prove to be the case.

Diphtheria.

The mortality and incidence of diphtheria continue to fall, no confirmed cases having occurred in the Division during the last 3 years.

If this record is to be maintained it is vital to secure that not less than 75% of babies are immunised before their first birthday, otherwise a return of diphtherial outbreaks is a definite possibility. The virtual disappearance of diphtheria is conditional upon the maintenance of an adequate level of immunisation.

Arrangements for immunisation have continued as in previous years, the inoculations being given at Infant Welfare Centres or by private medical practitioners. The response has been reasonably satisfactory and no special mobile campaigns have been held.

Number of Children Immunised in 1951.

Urban District	Under 5 years	5—14 years	Total	"Booster" Doses
Colne Valley	249	4	253	130
Denby Dale	70	_	70	30
Holmfirth	173	1	174	39
Kirkburton	111	4	115	24
Meltham	73	3	76	67
Total	676	12	688	290

Records of the immunisation state of children in the Divisional area as at the 31st December, 1951, are shown below.

Age at 31-12-51 i.e., Born in Year	Under 1 1951	1 1950	2 1949	3 1948	4 1947	5 to 9 1942-46	10 to 14 1937-41	Total Under 15	
Number immunised	33	472	669	784	1002	3,565	2,439	8,964	
Estimated mid- year child popula- tion 1951, as sup- plied by Regis- trar-General			6,705	der 5	Childr 8,	8,825 14,530			
Percentage of child population immunised		Ę	51.88		68	3.03	61.69		

Smallpox.

The number of records of vaccinations and re-vaccinations received during the year was 197 and 94 as compared with 248 and 82 respectively in the previous year.

Details of the various age groups vaccinated and re-vaccinated are given below.

Number		Age	at Date	of Vacci	nations:		
Vaccinated		Under 1	1 year	2 to 4	5 to 14	5 or ove	r Total
Colne Valley		46	2	3	1	3	55
Denby Dale	• • •	5			$\hat{2}$		7
Holmfirth	• • •	68	6	3	3	13	93
Kirkburton		23		2	1	3	29
Meltham		13			_		13
Number Re-Vaccinated	I						10
Colne Valley	• • •		_	1	1	10	12
Denby Dale Holmfirth	• • •	-		_		2	2
Kirkburton	• • •		-	2	3	55	60
Meltham	• • •				3	14	17
Meimain	• • •	-	_		-	3	3

No cases of Generalised Vaccinia or Post-Vaccinal Encephalomyelitis were reported, and no deaths from any complications of vaccination occurred during the year.

Whooping Cough.

No scheme for immunisation against Whooping Cough was in operation during the year but proposals to commence a restricted scheme were approved by the Local Health Authority in April, 1952.

MIDWIFERY AND MATERNITY SERVICES

Domiciliary Midwifery.

At the commencement of the year 8 whole-time midwives, 2 nurse/midwives, and 3 relief nurse/midwives were engaged in the Division. During the year one of the whole-time midwives resigned her appointment and one of the relief nurse/midwives ceased to undertake midwifery and became a full-time relief home nurse.

The vacancy for a whole-time midwife had not been filled by the end of the year, when the position regarding Midwifery Services was as follows:—

		Staff at 31st D	December, 1951
Urban District	Authorised Establishment	Whole-time Midwives	Nurse/Midwives
Colne Valley Denby Dale Holmfirth Kirkburton Meltham Relief	3 2 2 2 1 2	2 2 2 2 1	2 2
Division 20	12	7	4

Six independent midwives signified their intention to practice in the area, and attended a total of 8 cases.

Of the 1040 births notified and attributed to the Division, 297 occurred at home. The following table shows the number of cases attended:—

Cases attended by		As Midwives	As Maternity Nurses
(a) Whole-time County Midwives	(8)	218	12
(b) Nurse/Midwives	(4)	53	Ĝ
(c) Independent Midwives	(5)	3	5
Total	•••	274	23

Of the cases attended 3 were patients who normally resided outside the Division (outward transfers). There were 3 cases of women normally resident in the Division having domiciliary confinements at addresses outside the Division (inward transfers).

In addition, 13 miscarriages were also attended by domiciliary midwives.

The services of the domiciliary midwives are offered to all patients who are confined in hospitals or maternity homes but are discharged home before the 14th day of the puerperium. During the year 246 such patients received nursing care, 913 individual visits being paid to them, as compared with 185 patients receiving 439 visits in 1950.

Notifications:

The following notifications were received from midwives practising in the Division:

Death of Child							7
Stillbirths						* * *	8
Artificial Feeding			• • •				62
Laying Out the Dea	ad					* * *	2
Liability to be a so	urce	of infe	ection	•••	• • •		4

Medical Assistance:

Medical aid forms sent in by midwives during 1951 numbered 229 and were comprised as follows:—

			LYING-IN	
PREGNANCY		2	Chest Condition	1
Abortion		2	Condition of Breasts	6
Albuminuria			Mastitis	1
Ante-Partum Hæmorrhage		4		1
Hypertension		I	1 dill in 13089	5
Threatened Miscarriage		1	1 / 10X1d	1
	-		Skin Condition	
		10		15
LABOUR				
Abnormal Presentation		2		
Breech Presentation		3		
Delayed Labour		23		
Episiotomy		4		
Face Presentation		2		
Forceps Delivery		$\frac{1}{2}$	THE CHILD	
		$\frac{1}{2}$	Asphyxia	4
		1	Celphalhæmatoma	1
Persistent Posturing	• • •	4	Chest Conditions	2
Post-Partum Hæmorrhage		3	Convulsions	1
Precipitate Labour				6
Premature Labour		2	Discharging Eves	2
Retained Placenta		8	General Condition	1
Rigidity of Cervix		2	Jaundice	1
Ruptured Perineum		121	Ophthalmia	1
Stillbirth		1	Prematurity	2
Uterine Inertia		2	Septic Spots	2
		182	t-	22
C 1 A' A 1 '				

Gas and Air Analgesia.

At the end of 1951, all the 11 midwives in domiciliary practice held the certificate in Gas and Air Analgesia administration and were equipped with the necessary apparatus.

Analgesics were administered by domiciliary midwives to 209 cases, or 70.4% of the cases attended, as compared with 225 cases in 1950.

Ante-Natal Clinics.

There are 7 Ante-Natal Clinics in the Division, all of which are held monthly except the Golcar Clinic, which is held fortnightly.

During the year, 121 patients made 373 attendances at the various clinics, details of which are given in the following table. Compared with the previous year, when 176 patients made 588 attendances, it will be seen that there has been a further falling-off in attendances.

Clinic	No. of sessions	No. of patients	No. of attendances	Average attendance per session
Denby Dale	12	20	30	2.50
Holmfirth	12	10	21	1.75
Lepton	13	22	72	5.54
Meltham	12	24	80	6.67
Skelmanthorpe	12	19	59	4.92
Golcar	23	17	84	3.65
Slaithwaite	12	9	27	2.25
Total	96	121	373	3.89

In addition to the regular Ante-Natal Clinics, occasional patients are seen at the Child Welfare Clinics.

In view of the continued fall in attendance, it is questionable whether the retention of all the existing clinics is justifiable, and further closures may be inevitable in the near future.

No special Post-Natal Clinics were held, but patients are seen for post-natal examination at the Ante-Natal Clinics. The attendances, however, leave much to be desired. More could be done by way of special visits by health visitors but staffing difficulties prevent this.

"Flying Squad" Arrangements.

A "Flying Squad," based on the Huddersfield Royal Infirmary, is available for dealing with emergencies arising in the domiciliary midwifery service. The "squad" consists of an obstetrical consultant together with nursing staff, and provides facilities for blood transfusion and other emergency treatment.

Normally the call for the services of the "squad" is made to the hospital by the general practitioner attending the case, but a call for assistance can be made direct by the midwife if the urgency and time available precludes her from getting in touch with the patient's own doctor first.

The "squad" was not called upon to attend any patient in this Division during the year.

Ante-Natal Hostel.

During the year no cases were admitted from this Division to the Brighouse Ante-Natal Hostel for expectant mothers.

The difficulties in arranging for the care of their families is a deterrent to vacancies being accepted by patients who would undoubtedly benefit from a stay in the hostel.

Institutional Midwifery.

No difficulty has been experienced regarding maternity accommodation, the majority of expectant mothers being able to secure admission to the institution of their own choice.

Of the 1,040 births attributed to the Division, only 297, or 28.56%, took place at home, as compared with 342, or 32.7%, for the previous year.

Owing to shortage of staff, however, patients are from time to time discharged before the 14th day, as will be seen from the table overleaf.

The Divisional Medical Officer is informed by the hospital authorities when these early discharges are to take place, and arrangements are made for the appropriate domiciliary midwife to attend the patient at home until the 14th day of the puerperium.

			I	Day (of Dis	charg	e				
	4	5	6	7	8	9	10	11	12	13	Total
No. of Visits	 — —		1 5	2	15 78	22 95		7 20	6 12	1 2	111 421
Denby Dale U.D. No. of Patients No. of Visits	 		1 8	 — —	2 8	9 55	14 40	2 8		2 7	30 126
Holmfirth U.D. No. of Patients No. of Visits	_	_ 		$\begin{bmatrix} 2 \\ 2 \end{bmatrix}$	 - -		 4 10	 	 	 — —	6 12
Kirkburton U.D. No. of Patients No. of Visits	_ _	_	_	3 16	5 22	 16 64	 28 92	 13 37	3 8	3	69 242
Meltham U.D. No. of Patients No. of Visits	1 4	_	—	 	3 17	 5 24	18 54	_	$\begin{bmatrix} 2 \\ 10 \end{bmatrix}$	1 3	30 112
Total No. of Patients	1		2	7	25	52	121	22	11	5	246
Total No. of Visits	4	_	13	27	125	238	396	65	30	15	913

Details of the places of confinement of patients from the various districts are shown in the following table.

ADMISSIONS TO MATERNITY HOSPITALS

Total	322	193	132	51	9	13	26	743	297	1040
Meltham	40	1	12		-	1	2	ت ت	25.	08
Kirkburton	S IO		27	16	ιΩ	6	4	146	99	212
Holmfirth	ານ	193	ιo	4	1	1	1	207	64	271
Denby Dale	44	1	Ø	ιΩ	yeel	4	တ	65	99	131
Colne Valley	148	1	80	25	1	1	17	270	76	346
Place of Confinement	Princess Royal Maternity Home	Holme Valley Memorial Hospital	St. Luke's Hospital, Huddersfield	Huddersfield Royal Infirmary	Other Maternity Hospitals	Other General Hospitals	Private Nursing Homes	Total Institutional	Domiciliary	Total Confinements

CHILD WELFARF

Infant Welfare Clinics.

Weekly clinic sessions are held at Golcar, Holmfirth, Honley, Kirkburton, Lepton, Linthwaite, Marsden, Meltham, New Mill, and Slaithwaite, whilst clinics are conducted twice monthly at Denby Dale and Skelmanthorpe.

During the year 2,014 children were seen and a total of 15,547 attendances were made, details of which are shown in the following table, as compared with 2,060 children and a total of 16,712 visits in the previous year.

011	No. of	Children seen			.\tt	endanc	es	Average attendance per session		
Clinic	sess- ions	Under 1 1-5		Total	Under	1-5	Total	Under 1 1-5		
Golcar	49	38	91	129	926	430	1,356	18.89	8 78	
Holmfirth	49	70	246	316	915	693	1,608	18.67	14.14	
Honley	50	20	94	114	572	533	1,105	11.44	10.66	
Kirkburton	48	30	85	115	517	289	806	10.77	6.02	
Lepton	47	41	65	106	412	284	696	8.77	6.04	
Linthwaite	4.7	48	128	176	1,064	697	1,761	22.64	14.83	
Marsden	49	56	226	282	987	1,246	2,233	20.14	25 43	
Meltham	47	46	192	238	964	818	1,782	20.51	17.40	
New Mill	51	26	117	143	475	636	1,111	9.31	12.47	
Slaithwaite	49	61	179	240	941	1,096	2,037	19.20	22.37	
Denby Dale	24	33	54	87	308	343	651	12.83	14.29	
Skelmanthorpe	23	29	39	38	246	155	401	10.69	6.74	
Total	533	498	1,516	2,014	8,327	7,220	15,547	15.62	13.55	

The monthly sessions of the Weighing Centre at Emley have continued, 15 individual children having made 74 attendances, as compared with 28 children making 149 attendances in 1950.

Premature Babies.

During the year 49 babies weighing 5½lb. or less were born in hospitals or nursing homes to mothers normally resident in the Division, and 14 were born at home, as compared with 50 and 17 respectively for the previous year. Of those born at home, one died during the first 24 hours, one on the third day, and two on the eighth day. The remaining 10 survived at the end of one month. Particulars of survival are shown in the following table:

THE FATE OF PREMATURE BABIES BORN IN THE DIVISIONAL AREA

Percent-	Survival in 1950		97.1	100.0	100.0	100.0	40.0	33.3	0.00	0.00	86.6
Fercen- tage	Survival in 1951		9.96.8	100.0	100.0	100.0	50.0	0.00	50.0	0.00	90.5
ng		H	30	0	6	1	_	ı	+	T	57
rvivi Days		Ü	17	4	9	īΘ		1	1	-1	88
Number Surviving Over 28 Days		B ₂	9	က	1	G1	1	1	—	1	61
umbe Ove		B1	7	-	I	1	1	1	1	1	GI
Ž		<	9	7	က	ı	I	I	I	1	10
Over	dn 1/1	days	1	1	1	ı	ı	_	ı	ı	-
		14	1	- 1	1	1	1	1	1	I	1
		13	1	1	1	1	1	1	ı	1	1
	'eek	3	1	- 1	1	1	1	1	- 1	1	1
1	Second Week	11	ı	1	1	-1	- 1	1	-1	1	1
val).	Secor	10	1	1	1	1	ı	ı	1	ı	1
survi	33	6	1	1	- 1	1	ı	- 1	1	1	1
(days of survival).		00	1	f	ı	- 1	-		1	1	63
(day		17	1	-	1	1	1	1	1	1	1
ying		9		1	1	1	1	1	- 1	1	1
Number Dying	ek	10	1	- 1	i	1	1	1	- 1	1	1
lumb	First Week	47	1	- 1	1	I	- 1	ı	1	1	1
Z	Firs	က	-	1	1	- 1	1	1	1	1	-
		61	1	1	1	- 1	1	1	t	- 1	1
			1	1	1	- 1	1	- 1	-	-	GI
ıre	-	Born	1	ramed	4	23	31	ı	-	ಣ	13
Number of Premature Births		H	31	0	0	1	©1	GI	ତୀ		63
r of Pre Births	ive	C	17	77	:0	10	_	-	I	hand	35
ber o	Born Alive	B	9	ಬ	1	63	1	1		1	21
Zum	Bor	BI	-	7	ı	1	1	1	1	1	2
	,	A	1	-	က 	-	-	-	-	1	7
	Weight	lbs.	5-5-5	43-5	4-43	33-4	3-3	9 1 - 1 - 1 - 1 - 1	61		

A: Born at home and attended by a midwife.
B1: Born in a Private Nursing Home.
B2: Born in a Maternity Home.
C: Born in a General Hospital.
T: Total.

1,040 63 6.1 13

Total unadjusted live births
Number of live premature births
Percentage of total live births
Number born dead

At the end of the year there were 2 midwives who had special training in the care of premature babies, having attended a course at the Sorrento Hospital, Birmingham.

One premature baby outfit is available in the Division and is kept at the Divisional Health Office. Arrangements are made for the outfit to be conveyed by ambulance to any household where its use is thought to be advisable by the midwife. During the year the outfit was called into use on 5 occasions.

Day Nurseries.

There are no day nurseries in the Division.

Nurseries and Child Minders' Regulations Act, 1948.

There are no nurseries or child minders in the Division registered under this Act. The private nursery formerly provided by a textile firm was closed by the firm owing to trade recession early in the year.

SCHOOL HEALTH SERVICE

Introduction.

The policy of visiting each school twice per year for the purpose of routine medical inspections has continued. This practice makes it possible for all entrants to be examined within not more than 6 months of commencing school and also enables the children with defects to be kept under closer observation than would be the case if the schools were only visited annually.

The general health of children has been well maintained and the majority of defects found are defective vision, enlarged tonsils and adenoids, and minor degrees of flat foot.

The ascertainment of handicapped pupils in need of special educational treatment has continued, 36 pupils being added to the list during the year, making a total of 177 at the end of the year. There is still great difficulty in placing these pupils in suitable schools but the opening by the Education Committee of the special schools for educationally subnormal girls at Royd Edge, Meltham, and for educationally subnormal boys at Baliol, Sedbergh, has eased the position somewhat so far as these classes of handicapped pupils are concerned. There is, however, need for much greater provision.

It is with great regret that one has to report that there is no improvement in the position of the School Dental Service generally, and that it is still virtually none existent in this Division.

Schools in the Area.

There are in the Division 68 schools. The approximate number of pupils on the registers in December, 1951, was 8,867, composed of 2,550 infants, 3,655 juniors, and 2,662 seniors. Of the 63 Primary and "Through" schools, 32 are Voluntary and 31 are County schools. The distribution is as follows:—

	Colne Valley	Denby Dale	Holm- firth	Kirk- burton	Mel- tham	Total	
Type of School	Schools	Schools	Schools Pupils	Schools	Schools	Schools	
Primary	9 874	9 918	14 1259	13 1340	5 464	50 4855	
Secondary Modern	1 277	1 519	1 461	1 261		4 1518	
Through	10 1441		2 254	1 273		13 1968	
Grammar			1 526			1 526	
All Types	20 2592	10 1437	18 2500	15 1874	5 464	68 8867	

Pupils from Colne Valley attend Royds Hall Grammar School, which was under the joint control of the Huddersfield County Borough Council and the West Riding County Council until the 1st August, 1951, when the agreement between the two Authorities terminated. Since that date the responsibility for the County Pupils at Royds Hall Grammar School as far as the School Health Service is concerned has been taken over by the County Borough Council.

Some pupils from outlying parts of the Division attend Grammar Schools at Mirfield, Penistone, etc.

Medical Inspections.

The periodic medical examination of the three age groups, i.e., entrants (5 years +), intermediates (10 years +), and seniors (14 years +), continued throughout the year. In all, 145 separate inspections were carried out at the 68 schools in the Division. As in previous years, pupils continuing attendance at school beyond the age of 15 years were given additional routine medical examinations at 16 and 18 years. Re-examinations of children, who at previous periodic or special examinations had been found to have defects requiring treatment or observation, were made at each school medical inspection.

Periodic Medical Inspections.

During the year 3,046 periodic inspections were carried out as compared with 2,434 in 1950.

The number of children inspected in the various age groups is as follows:—

Prescribed age gr	coups.				
Entrants	• • •		 * * *		1259
Intermediates			 • • •	• • •	861
Leavers	• • •		 	• • •	652
	Total		 		2772
Other periodic in	spections		 		274
	Grand	Total	 	1 . 1	3046

Findings of Medical Inspections.

It is generally agreed that the children of today are healthy and that the incidence of serious physical defects amongst them is low. On the other hand, defects are still found among school entrants which should not exist. This is particularly true of nose and throat conditions. It is well known that these defects are more common in a smoke polluted atmosphere and a reduction in atmospheric pollution has been followed by a reduction in the incidence of naso-pharyngeal disease. Observation by soot deposit gauges in the Colne and Holme valleys shows that there is room for great improvement in this matter. Of the children examined as "periodics," some 357 individual children were found to require treatment for one or more defects. The following table gives details of such defects:—

Group	Defective Vision (excluding Squint).	For any of the other conditions recorded in table of defects	Total Individual Pupils
Entrants Second Age Group Third Age Group	3 44 29	158 60 39	155 110 63
Total (prescribed groups) Other periodic inspections	76 21	263	328 29
GRAND TOTAL	97	271	357

General Condition of Children.

All pupils at routine medical inspections are classified as to their general condition at the time of the inspection as follows:—

"A" (Good) — those better than normal.

"B" (Fair) — those normal.

"C" (Poor) — those below normal.

Details of the children inspected during the year are as follows:-

	Number	(1)	Good	(B)	Fair	(C) Poor	
Age Group	of Pupils Inspected	No.	% of Col. 2	No.	0' of Col. 2	No.	% of Col. 2
Entrants Second Age Group Third Age Group Other Periodic	1259 861 652	759 4 3 3 331	60.3 50.3 50.8	473 403 310	37.6 46.8 47.5	27 25 11	2.1 2.9 1.7
Inspections	274	146	53.3	123	44.9	5	1.8
TOTAL	3046	1669	54.8	1309	43.0	68	2.2

Special Examinations.

The first time in each year that a child is examined, other than at a routine periodic inspection, is regarded as a "Special Examination." Thus all children with defects which were noted in a previous year and who are seen again are classified as "Specials" at the first examination in each year, and as "Follow-ups" at each subsequent examination in the same year. So far as is practicable all children with known defects are examined twice in each year.

Also included as "Specials" are children aged 8 years + who are specially examined for visual acuity as this would normally not be done until the routine periodic examination at 10 years +. During the year 639 of these children were tested for visual acuity, of which 132 were found to require treatment and 145 to be kept under observation.

Other Examinations.

In addition to routine, special, and follow-up examinations of children at school medical inspections, a total of 148 children were examined at home or at school for various reasons. These include non-attendance at school, fitness to attend school camps, participation in part-time employment or entertainment under the Children and Young Persons Act, 1937, and also those examined with a view to providing special educational treatment.

The following table gives details of all defects noted at both periodic and special examinations. All defects noted at medical inspections as requiring treatment are included in this return, whether or not this treatment was begun before the date of the inspection.

Return of Defects Found by Medical Inspection in the Year Ended 31st December, 1951.

		Number o	of Defects.	
Defect or Disease.	Periodic I	nspections	Special In	nspections.
	Requiring Treatment	Requiring Observa- tion but not treatment	Requiring Treatment	Requiring Observation but not treatment
Skin	8	12	3	9
Eyes: (a) Vision (b) Squint (c) Other	97 24 4	213 25 14	196 16 3	544 17 8
Ears: (a) Hearing (b) Otitis Media (c) Other	1 3 2	12 6 6	2 1 8	12 14 11
Nose or Throat	91	226	149	144
Speech	14	16	43	11
Cervical Glands	1	24	2	5
Heart and Circulation	2	16	1	22
Lungs	9	92	6	60
Developmental (a) Hernia (b) Other	1 2	7 7	1 6	7 21
Orthopaedic (a) Posture (b) Flat Foot (c) Other	1 49 33	18 43 81	5 22 25	10 56 52
Nervous System (a) Epilepsy (b) Other	1	1 22	1 1	5 18
Psychological (a) Development (b) Stability	25	8	70	12
Other	_	2	6	14
TOTAL	368	852	574	1053

Uncleanliness.

The problem of head infestation is still a matter of serious concern and takes up a considerable amount of the time of the School Nurses. Routine inspections are carried out at all schools as far as possible at least once every term. Parents of children found to be infested with vermin or nits are sent a communication from the Divisional Health Office and where possible visited by the School Nurse. The more heavily infested cases are excluded from school for a few days and if no improvement has been effected by the parents a Cleansing Notice is issued under Section 54(2) of the Education Act 1944. The Notice informs the parents that the child must be cleansed to the satisfaction of the Authorised Officer of the Authority within 48 hours and failing that a Cleansing Order may be issued authorising the cleansing of the child by an officer appointed by the Education Authority.

The total number of inspections made was 23,439 and 882 instances of infestation were found as compared with 16,020 and 738 respectively in 1950.

In considering these figures it should be pointed out that a much higher standard than in former years is now expected, and all infestations, however slight, are now recorded. The grossly infested heads which were at one time common are now rarely seen, but there remains a hard core of frequently infested families who are the main cause of the infestation of other children.

Total number of warning letters sent	 673
Total number of exclusion notices served	
Total number of home visits paid	178
Total number of individual children found to	
verminous	 702
Total number of Cleansing Notices issued	 26
Total number of Cleansing Orders issued	 12

Although the number of individual children found to be infested was 114 more than in 1950, the rise is probably due to the increased zeal of the School Nurses rather than to any real deterioration in the standard of cleanliness.

A firmer line was, however, taken with persistent offenders, 26 Cleansing Notices being issued and 12 Cleansing Orders being carried out.

When a child who has been cleansed by an Officer of the Education Authority as a result of a Cleansing Order is found at a subsequent inspection to be re-infested, the Authority may take proceedings against the parents under Section 54(3) of the Education Act for allowing re-infestation to take place. In October, proceedings were taken in the West Riding Court at Barnsley under this Section of the Act in respect of two children who had been found infested on frequent occasions. The Magistrates found the cases proved, and the mother of the children was find the maximum penalty of twenty shillings in each case.

Arrangements for Treatment.

School Clinics.

There are no special school clinics set up in this Division but minor ailments receive attention and "booster" doses of diphtheria prophylactic are given at 12 Infant Welfare Clinics in the area. During the year a total of 645 attendances were made by school children at such clinics.

Special Clinics.

Ophthalmic Clinics.

The arrangements detailed in last year's report have continued, Doctor J. V. Kirkwood devoting two sessions per week to clinics in this Division.

During the year 71 special clinic sessions were arranged and these were attended by 521 children. Spectacles were prescribed for 162 children, 146 were found not to require any change, and 213 did not require spectacles. The number of children who attended for re-checking of glasses newly obtained was 278 and of these 7 had further glasses prescribed.

The time lag in obtaining new spectacles which developed after the commencement of the National Health Service Act has now virtually disappeared and most prescriptions can be dispensed within a week.

Ear, Nose, and Throat Clinics.

The special Ear, Nose, and Throat Clinic for West Riding Children conducted by Mr. W. O. Lodge, M.D., F.R.C.S., has been continued at the Huddersfield Royal Infirmary. During the year 8 sessions were held and 165 individual children were seen, 117 being referred for operative treatment.

Orthopædic Clinics.

The special monthly session for West Riding Children has continued at the Huddersfield Royal Infirmary. At the 13 sessions held during the year 230 individual children made a total of 364 attendances.

The conditions for which they were referred were as follows:

Flat Foot					• • •		67
Claw Foot							22
Knock Knee							66
Genu Varum						• • •	3
Other Deform	ities of T	oes			• • •		8
Fractures							5
Postural Defor	rmities .						14
Other Deformi	ities .					• • •	12
Congenital Con						• • •	4
Acute Poliomy					• • •		13
Perthes Diseas				• • •		• • •	3
Tubercular Co			• • •	• • •		• • •	3
Other Condition	ons .				• • •	• • •	10
						_	200
						4	200

The treatment centres provided by the County Council at Golcar and Holmfirth and staffed by the Orthopædic Nurse have dealt with a decreasing number of patients, only 29 patients having been treated and 174 attendances made.

The decrease in attendance is due to the fact that most patients find it more convenient to attend the centrally situated Physiotherapy Department at the Royal Infirmary than to come to the centres at Golcar and Holmfirth. During the later months of the year the attendances at Golcar fell to such small numbers that in November it was decided to cease holding treatment sessions there for the time being.

Child Guidance Treatment.

The arrangements with the Barnsley Education Committee for the treatment of West Riding children at the Barnsley Clinic continued until the 1st May, when Doctor M. M. MacTaggart, the Psychologist, was appointed in a position under the West Riding Education Committee. She now holds clinics at Wakefield, Shipley, and Rawmarsh. In addition she pays regular visits to special schools, including Royd Edge.

During the year 21 children have received treatment either at Barnsley or at the newly established County Clinics.

Ultra-Violet Ray Treatment.

Facilities are now available for treatment by Ultra-Violet Radiation at Golcar, Holmfirth, and Denby Dale. Cases for treatment are referred by School and Infant Welfare Medical Officers and by General Practitioners. During the year 53 children received courses of treatment.

Pædiatric Clinic.

During the year Doctor C. C. Harvey, M.D., M.R.C.P., the County Pædiatrician, held a special pædiatric session at the Golcar Clinic where 10 individual children suffering from cardiac diseases were seen.

Speech Therapy.

Early in the year a Speech Therapist, Miss Fish, was appointed for duty in Divisions 19, 20, and 21. This permits four sessions to be held weekly in Division No. 20.

Whilst this is a considerable improvement on the time available last year there is still need of more weekly sessions. In order to overcome as far as possible the inaccessible situation of Golcar so far as the rest of the Division is concerned sessions have been arranged in the at present unused Dental Clinic at Honley, and by the kind co-operation of the Divisional Education Officer, Mr. Beardsell, two are held in the Divisional Education Offices in Huddersfield. These additional centres have proved a very great convenience to parents. The remaining clinic session is held at Golcar.

In August, 1951, Miss Fish asked for a transfer to a Division nearer her home and she was replaced by Miss Watkinson.

During the year 165 sessions were held at the various centres.

Details of the children treated are shown in the following table:—

	Stammers	Speech Defects
No. of new cases admitted for treatment during the		
year	31	63
No. of cases already attending for treatment from		
previous year	6	11
Total number of cases treated	37	74
No. of cases discharged during year:—		
Speech normal	7	24
Unsuitable for treatment	6	6
Left school	1	1
By reason of non-attendance	1	4
No. of cases awaiting treatment at the end of		
the year	7	20
No. of visits made to schools	23	

Treatment Tables.

The following tables give details of treatment given to school-children under the Authority's schemes and otherwise. The treatment provided otherwise than by the Authority includes all treatment known by the Authority to have been so provided, including treatment undertaken in school clinics by the Regional Hospital Board.

1. Diseases of the Skin.

					Number of cases treatment du	
					By the Authority	Otherwise
Ringworm:	(i)	Scalp		 		_
	(ii)	Body		 		1
Scabies				 	_	2
Impetigo				 	10	1
Other Skin	Dise	ases	• • •	 • • •	14	12
Total				 	24	16

2. Eye Diseases, Defective Vision, and Squint.

	Number of cases dealt with		
	By the Authority	Otherwise	
External and Other, excluding Errors of			
Refraction and Squint	5	3	
Errors of Refraction, including Squint	_	332	
Total	5	335	
Number of Pupils for whom Spectacles			
were: (a) Prescribed	_	277	
(b) Obtained		308	

3. Diseases and Defects of Ear, Nose, and Throat.

	Number of cases treated.		
Received Operative Treatment:—	By the Authority	Otherwise	
(a) For diseases of the Ear (b) For Adenoids and chronic Ton-	-	5	
sillitis (c) For other Nose and Throat con-	_	361	
ditions	0 0000	5	
Received other forms of treatment		12	
Total	_	383	

4. Orthopædic and Postural Defects.

(a) Number treated as in-patients in Hospitals		2
	By the Authority	Otherwise
(b) Number treated otherwise, e.g. in Clinics or Out-Patient Departments	56	12

5. Child Guidance Treatment.

	Number of cases treated.		
	In the Authority's Child Guid-		
	ance Clinics	Elsewhere	
Number of Pupils treated at Child			
Guidance Clinics	14	13	

6. Speech Therapy.

	Number of cases treated.		
	By the Authority	Otherwise	
Number of Pupils treated by Speech			
Therapist	111	3	

7. Other Treatment Given.

	Number of cases treated.		
	By the Authority	Otherwise	
(a) Miscellaneous Minor Ailments (b) Ultra Violet Light	286 53	111	
Total	339	111	

Hospital Schools.

Children requiring prolonged hospital treatment are now often admitted to special "long-stay" hospitals, many of which have educational facilities which are recognised by the Ministry of Education. They are known as Hospital Schools.

The number of children away at these schools, together with the details of admissions and discharges during the year, is as follows:—

Name of Hospital School	No. of children from this Division	Reason	Admitted during 1951	Discharged during 1951
Royal Liverpool Children's Hospital, Heswall	1 (M.E.)	Physically Handicapped	2-5-51	21-9-51
Leasowe Children's Hospital School, Wallasey	1 (G.L.)	Physically Handicapped	_	_
Pinderfields Hospital School, Wakefield	1 (S.R.)	Physically Handicapped	26-9-51	
Fielden Long- stay Hospital, Todmorden	2 (J.S.) (P.L.)	Physically Handicapped	13-9-51 8-51	10-51
Heritage Craft School, Chailey	1 (C.P.)	Physically Handicapped	_	_

Convalescent Home Treatment.

Arrangements are made for selected school children to be sent to Convalescent Homes at the expense of the Education Committee. The children selected are usually suffering from general debility and the need for convalescent treatment is approved by the School Medical Officer before financial responsibility is accepted.

During the year 8 children were sent to the following convalescent homes:—

Taxal Edge Convalescent Home, Whaley Bridge, near Manchester	2
Seabright House Convalescent Home, St. Annes-on-Sea	4
Ormerod Convalescent Home, St. Annes-on-Sea	2

Infectious Diseases.

The following table shows the number of cases of infectious diseases occurring in school children.

District	Measles	Whooping Cough	Scarlet Fever	Pneumonia	Encephalitis	Dysentery
Colne Valley	217	46	63	4	1	8
Denby Dale	97	9	6	_		
Meltham	92	48	8	5		
Kirkburton	32	5	17		1	1
Holmfirth	74	16	19			31
Total	512	124	113	9	2	40

Diphtheria Immunisation.

The previous arrangements for diphtheria immunisation have continued, the injections being given by private practitioners and at the Welfare Centres.

The majority of children are now immunised before entering school. This should always be the case and the importance of immunisation in infancy cannot be over emphasised. Children protected in infancy should have booster injections when they commence school and five years later

No special immunisation sessions were held in schools during the year.

Deaths in School Children.

During the year 4 deaths were registered amongst school children (3 boys and 1 girl) aged 5—16 years. The following are brief details:—

Case No.	Sex & Age	Cause of Death
1	Boy aged 7 years	 1(a) Broncho-Pneumonia. (b) Influenza. 2. Congenital Abnormality of Central Nervous System.
2	Boy aged 9 years	1a Miliary tuberculosis of lungs. 2 Mental deficiency — mongolism.
3	Girl aged 10 years	Bronchiolitis. Post Mortem without Inquest.
4	Boy aged 14 years	Sub-arachnoid Hæmorrhage following ruptured congenital aneurysm of the cerebral artery and accelerated by a blow on the side of the neck, caused by his being struck by a piece of plywood which had been thrown in the air whilst playing. Post Mortem. Misadventure. Inquest.

Provision of School Meals.

School meals are available at all schools in the Division. In some instances they are cooked in the individual school premises and in others are brought ready cooked from other school canteens. The meals are well cooked and varied. The number of pupils who take school meals varies much from school to school. In some almost 100% stay for the school dinner, whilst at others less than half have the meal. Each school child is entitled to \frac{1}{3}-pint of milk daily free of charge. Here again many children, particularly the older ones, refuse to accept what is provided for their own benefit.

Very few children have meals at the expense of the Education Committee. At the end of the year, out of 8,867 children on the school rolls, 5,155 were taking school meals and 5,851 were having school milk.

In order to supplement the diet of infants, Vitamin A and D capsules and orange juice are offered in schools to children of 7 years and under.

Youth Employment Service.

There is close co-operation between the School Health and Youth Employment services. The medical records of all school leavers are considered by the School Medical Officer before the pupils are interviewed by the Youth Employment Officer and types of work for which any child is, in the opinion of the Medical Officer, unsuited are pointed out.

During the year recommendations were made that 23 children should not be employed in the following categories of work.

1 Heavy manual work (2). 2 Exposure to bad weather (1). 3 Work in damp atmosphere (1). 4—Work in dusty atmosphere (2).

5—Normally acute vision (5). 6—Normal colour vision (5). 7—Normal hearing (3). 8—Work near moving machinery or moving vehicles (3). 9—Prolonged standing, much walking, or quick movement from place to place (1).

The more seriously handicapped children are recommended to the Youth Employment Officer for inclusion in the Disabled Persons Register.

It is disappointing to report that in spite of the recommendations of the Youth Employment Officer and the School Medical Officer pupils frequently take up work in unsuitable occupations.

In connection with the Employment of Children Bye-Laws 29 children were examined as regards their suitability for employment outside school hours. Certificates were granted for employment as follows:—

Newspaper Delivery	 		22
Dancing and Entertainment	 	• • •	4
Errand Boys	 	•••	2
Shop Assistants	 		1

Handicapped Pupils.

Early ascertainment of Handicapped Pupils is one of the most important functions of the School Health Service.

A register is maintained of all pupils who owing to some mental or physical disability require special educational treatment.

During the year 50 pupils have been examined with reference to their need of special educational treatment, and recommendations for the provision of same were made in 36 cases. Following re-examination during the year 22 children were removed from the register as no longer requiring special educational treatment, or because they were over school age.

At the end of the year 177 pupils were included in the register, the sub-division into the various classes being as follows:—

Maladjus	sted						6
Deaf					• • •	• • •	2
Delicate				• • •		• • •	13
Speech							35
Partially	Sight	ted			• • •	• • •	6
Blind						• • •	1
Physicall	y Ha	ndica	pped				22
Education	nally	Sub-r	normal				92
							177

The increased provision by the Education Committee of residential school accommodation for Handicapped Pupils has enabled an increasing number of children to receive the special educational treatment they require. The facilities available, however, are still inadequate, particularly for Educationally Sub-Normal pupils, 41 of whom were waiting for admission to special schools, and 51 for special treatment in ordinary schools at the end of the year.

At the beginning of the year 14 children were in attendance at Special Schools and 20 children (9 educationally sub-normal, 4 delicate, 3 physically handicapped, 2 partially sighted. 1 deaf, and 1 maladjusted) were admitted during the year. There were 11 discharges (6 delicate, 3 physically handicapped, 1 educationally sub-normal, and 1 deaf) leaving a total of 23 children in attendance at Special Schools at the end of the year, the details being as follows:—

Category	No. awa	y Location of Special School
Blind	1	Sheffield School for Blind Children.
Partially Sighted	4	3 at School for Partially Sighted Child-
Tarttarry 518med		ren, Fulwood, Preston.
		1 at Exhall Grange School, near
		Coventry.
Deaf	1	Lawns House School, Leeds.
Delicate	4	1 at Ingleborough Hall, Clapham.
		2 at Oak Bank Open-air School, Seven-
		oaks, Kent.
		1 at St. Catherine's Home, Ventnor.
Educationally	8	5 at Royd Edge, Meltham.
Subnormal		3 at Baliol School, Sedbergh.
Maladjusted	1	Oak Bank, Ingrow, Keighley.
Physically	4	1 at Leasowe Children's Hospital
Handicapped		School.
		1 at Heritage Craft School, Chailey,
		Sussex.
		1 at Exhall Grange Special School,
		Coventry.
		1 at Pinderfields Hospital, Wakefield.

At the end of the year 59 pupils in the following groups were awaiting placement in Special Schools or Hostels:—

** 0				
Deaf			 	 1
Maladjusted			 	 3
Delicate			 	 4
Educationally			 	 41
Physically Har		ped	 	 9
Partially Sight	ed		 	 1
				59

Liaison with Hospitals and General Practitioners.

It is pleasing to report that much more information is now being obtained from the hospital service regarding school children who receive treatment in hospital. Recommendations for special educational treatment for handicapped children are also made by the Hospital Consultants.

Under an agreement with the British Medical Association and the Society of Medical Officers of Health, children found at school suffering from defects requiring specialist advice or treatment are notified in the first instance to the family practitioner before an appointment at the Consultant's Clinic is arranged. By this arrangement the family practitioner is kept informed of defects found amongst his patients and copies of the Consultant's report are sent to him.

Sanitary Conditions of School Premises.

On the whole the schools in the Division are kept in a reasonable state of repair but owing to their age many of them are lacking in the provision of adequate washing facilities and satisfactory sanitary conveniences. Minor improvements have been effected at a number of schools during the year.

HEALTH VISITING

At the commencement of the year a Superintendent Health Visitor, 9 health visitors, and a tuberculosis visitor were engaged in the Division. During the year 3 Health Visitors resigned their appointments, 4 Health Visitors were appointed, and in addition one Health Visitor and an Assistant Health Visitor were engaged on a part-time basis. The Tuberculosis visitor was transferred to the Leeds Regional Hospital Board and was not replaced, her duties being shared amongst the general health visitors.

Urban District				Authorised Establishment	Staff at 31-12-51
Superintendent	Health	Visitor	 	1	1
Colne Valley			 	4	3
Denby Dale			 	2	1
Holmfirth			 	4	3
Kirkburton			 	3	2*
Meltham			 	1	1
Assistant Healt	h Visite	ors	 		2*
Tuberculosis Vi	sitors	• • •	 • • •	1	-
			 ,	16	13

* Includes 1 part-time.

The transfer of tuberculosis visiting to the general Health Visitors opened a new sphere of work for them. The changeover took a little time to become stabilised, but the scheme is now working satisfactorily. Whilst much can be said in favour of the full-time Tuberculosis Visitor from the point of view of the Chest Physician there are many advantages in having the work done by the District Health Visitors. The success or failure of the work depends on the individual co-operation between the members of the staffs of the Chest Clinic and the Health Department and in this connection mention must be made of the ever ready help given by Dr. R. N. Walker, the local Chest Physician, and his staff.

An increasing amount of the health visitors' time is being taken up in connection with the home visiting of the aged and home help cases.

The pre-school sessions at Slaithwaite, to which children are specially invited on reaching their 3rd birthday, have continued, and further sessions have been held from time to time in other parts of the Division. At each session 8 to 10 children are seen and the examination made is on the lines of a routine school medical inspection.

Many children who attended the Infant Welfare Centres as infants

but later ceased to attend are brought to these special sessions.

Owing to lack of staff the educational programme has progressed

slowly.

The following is a summary of the visits made by health visitors during the year:—

		ectant thers		under of age	Chil Between	Other Cases	
District	First Visits	Total Visits	First Visits	Total Visits	First Visits	Total Visits	Total Visits
Colne Valley Denby Dale Holmfirth Kirkburton Meltham	25 5 7 22 19	50 7 22 26 34	368 87 270 180 106	2038 374 1885 1000 602	1 7 12 9	1784 343 1581 1493 479	905 194 616 496 583
Division 20	78	139	1011	5899	29	5680	2794

The visits shown in the above table include 3,150 of a non-routine nature, an analysis of which is as follows:—

Prema	ture Bab	ies			 		24
Stillbir	rths				 		15
Infant	Deaths-	-01	years		 	7	
		1—5	years		 		_
T C	Dina					• • •	7 340
Intecti	ous Dise	ases			 	* * *	
Gastro	-Enteritis	3			 		3
Care a	nd After-	Care					
	Tubercul	losis			 	1012	
	Discharg	ged fro	om Hos	spital	 	22	
	Referred	by E	Home N	Turse	 	45	
	Others				 	126	
							1205
Home	Helps				 		667
Aged					 	• • •	561
Other					 		328
							3150

HOME NURSING

At the commencement of the year 12 home nurses, 2 nurse/mid-wives, and 3 relief nurse/midwives were engaged in the Division. During the year one of the home nurses resigned her appointment and one of the relief nurse/midwives ceased to undertake midwifery and became a full-time relief home nurse.

The establishment of home nurses approved by the Ministry of Health under the National Health Service Act and the staff position at the end of the year are as follows:—

Urban District	Authorised Establishment	Staff at 31st Dec., 1951			
Colne Valley Denby Dale Holmfirth Kirkburton Meltham Relief	3 2 2 3 1 1	Home Nurses 3 3 1 1	Nurse- Midwives — — 2 — 2		
Division 20	12	12	4		

Particulars of the work done in the various districts by the home nurses and nurse/midwives are shown in the following table. The amount of work done by the home nurses still varies considerably and further readjustment of districts is required as soon as this can be arranged.

	Hor	me Nursin	g	Midwifery		
	Trans- fers	New Patients	Visits Paid	Confine- ments	Visits Paid	
COLNE VALLEY URBAN DISTRICT Golcar Marsden and Slaithwaite Linthwaite	25 29 35	190 188 191	3,995 3,443 4,202	4 11 3	175 277 129	
	89	569	11,640	18	581	
Denby Dale Urban District Denby & Cumberworth Clayton West and Scissett Einley and Skelmanthorpe	15 11 17	49 61 124	1,950 1,278 2,962	5	14 4	
	43	234	6,190	5	18	
HOLMFIRTH URBAN DISTRICT Holmfirth New Mill Honley	32 22 17	146 57 140	2,869 2, 5 75 2,578		<u>1</u>	
	71	343	8,022		1	
KIRKBURTON URBAN DISTRICT Kirkheaton, Lepton & Flockton Kirkburton Shelley and Shepley	17 16 15	211 82 74	3,276 2,350 2,205	2 16 15	51 504 516	
	48	367	7,831	33	1,071	
MELTHAM URBAN DISTRICT Meltham	20	124	2,181	3	112	
Total for Division	271	1,637	35,864	59	1,783	

Cases Treated.

As in previous years, the types and duration of cases treated during the year have been analysed. There is considerable variation between the different districts. In some, the nurse's time is largely devoted to attendance on the chronic sick, whilst in other districts many acute medical and post-operative surgical cases receive attention. Increased use is also being made of home nurses by general practitioners for the administration of drugs by injection, and particularly of penicillin and streptomycin.

At Emley it has been customary for some time past for the nurse to hold morning and evening dressing sessions at her home. This has continued and during the year 54 patients suffering mainly from minor

injuries have made 185 attendances.

Cases Discharged.

Of the 1,571 cases the nurses ceased to attend during the year, 1,178 were discharged as recovered, 149 were transferred to hospital, and 244 died.

The tables given below show the duration of treatment and the

number of visits paid to patients in each group.

			Patients.				
Patients under Tr	eatmen	t	Recovered	Transferred	Died		
Less than 1 week 1- 2 weeks 2- 4 weeks 4-13 weeks 3- 6 months Over 6 months			 269 341 319 183 38 28	42 25 21 30 11 20	59 52 39 59 21 14		
TOTA	L	••••	 1 178	149	244		

NT 1 . C	White D	aid.			To Patients Who	
Number of	VISITS 17	ald		Recovered	Transferred	Died
3 or less			 	236	26	30
4-7			 	293	35	51
8-15				372	29	53
16-30			 	183	20	42
31 -50			 	50	18	29
51-75	****			19	6	15
76-100				14	9	4
Over 100			 	11	8	20
	TOTAL	J	 	1,178	149	244

Types of Cases Attended.

The new cases attended and the total visits paid have, as last year, been analysed. From the table given below it will be seen that Septic Conditions have again provided the largest number of new cases (221). Diseases of the Heart and Circulatory System (145) were the next most frequent. Post-Operative Dressings (115) were followed by Bronchitis (110), Senility (99), and Cerebral Hæmorrhage (94).

New cases of Cancer, all sites, numbered 62 as compared with 65 in the previous year, and those of Pneumonia were 49, as compared with 45 for 1950.

Type of Case	Transferred	New Cases	Visits Paid
Infectious		1	13
Pulmonary Tuberculosis	2	15	718
Non-Pulmonary Tuberculosis	2	3	193
Influenza	$egin{pmatrix} 2 \\ 2 \\ 2 \\ 2 \\ 2 \end{pmatrix}$	18	253
Pneumonia	2	49	700
Bronchitis	7	110	1491
Other Respiratory Diseases	1	24	371
Cancer of Uterus		4	116
Cancer of Stomach and Intestines	4	22	563
Cancer of Breast	1	7	577
Cancer of Other Sites	8	29	1,592
Diabetes	5	25	1,194
Cerebral Haemorrhage	20	94	2,685
Diseases of Heart and Circulation	31	145	4,598
Post-Operative Dressings	13	115	2,074
Injuries Burns and Scalds	9	67	1,725
Burns and Scales	3	49	1,065
Septic Conditions (Boils, Abscesses	4		
Carbuncles)	1	221	2,422
Uterine Prolapse	60	53	603
Other Gynaecological Cases		19	263
Male Genito-urinary Conditions	4	11	1,145
Rheimatic and Arthritic Conditions	14	22	1,556
Ear and Eye Conditions Varicose Ulcers	3	27	555
less as a Administration	7	19	1,324
Other Skin Diseases		6	156
Chronic Diseases of Norways Court	3	8	126
Chronic Diseases of Nervous System Mastitis	5	17	442
Mastitis Acute Abdominal Conditions		22	164
	1	37	308
71/2	4	68	333
Infantile Dies 1	4	19	631
Circum		30	161
Senility	20	4()	290
Other Conditions	- 11	99	3,324
	22	142	2,123
TOTAL	271	1.005	
	211	1,637	35,864

Patients suffering from the following conditions received the largest number of visits:—

Diseases of Heart and Circ	culati	on	• • •	 4,598	vicite
Senility				3,324	V 15105
				2,848	,,
Cerebral Hæmorrhage				2,685	,,
Septic Conditions				2,422	,,
Post-Operative Dressings				 2,074	,,
				 1,725	,,
Rheumatism and Arthritis				 1,556	1.

Travelling Facilities for Home Nurses and Midwives.

No serious difficulties have been experienced during the year with regard to transport and only one home nurse was dependent on public transport as a means of conveyance at the end of the year, when the position was as follows:—

		Using County Cars	Private	Dependent on Public
		Cars	Cars	Transport
Home Nurses	 	6	5	1
Nurse/Midwives	 	1	3	
Midwives	 	1	6	
				Barancesia
		8	14	1

No additional County Cars have been allotted for use in the Division but 2 of the older cars have been replaced.

THE HOME HELP SERVICE

The Home Help Service is provided under the National Health Service Act, 1946. Section 29 of the Act stipulates the class of case for which provision of a home help can be made. These are as follows:—

(a) Ill.

(b) Lying-in.

(c) An Expectant Mother.

(d) Mentally Defective.

(e) Aged.

(f) A Child not over compulsory school age.

Before a home help can be provided a form of application must be signed by the head of the household. If there are any adults in the house other than the householder and wife, and they are likely to get some benefit from the services of the home help, they also are expected to sign an application form. A medical certificate stating the condition from which the patient is suffering and that a home help is required must be submitted with all applications under Class (a) Ill. Usually a home help can be provided only when the ill person is in the house. If the ill person is removed to hospital then a home help can be provided only if there is need for a home help under one of the other classes, e.g., children not over school age in the house.

In the case of the aged there is no need for the person to be ill in order to qualify for the provision of a home help. The extent of the need depends on the physical capacity of the aged person and the other persons in the household. A home help assisting an aged person can undertake domestic work or household management only and must not be used as a sitter-in. A home help cannot be provided merely because a householder offers to pay full cost; each case is treated strictly on its merits.

Briefly, a home help may be allocated to a household where there is sickness sufficient to require medical or nursing care; she cannot attend

where a sick person is removed to hospital unless there is a child under school leaving age at home; she can attend to the domestic duties of the aged, mentally defective, and expectant of child, without stipulation as to sickness. The aged should generally be over 60 years of age, the mentally defective such as have been reported to the Health Committee, and those expectant of child would normally have some disability such as fatigue or varicose veins necessitating rest. She should as far as reasonably possible give her time to domestic duties or to family or household management (as appropriate to the case) and not undertake the duties of a "sitter-in."

Every applicant for a home help must sign an undertaking either to pay the full cost of the home help supplied or to give a statement of his income and capital and agree to pay the assessed charge according to the County Council scale. In assessing the charge the income of all persons assisted is taken into account. The actual assessment is carried out in the Divisional Welfare Office.

The present establishment of Home Helps for this Division is 17 which can be raised to an ultimate one of 22 should the need arise. In terms of full-time home helps the number employed throughout the year has only averaged 10.51, but it is encouraging to record that towards the end of the year the monthly average figure rose steadily and reached the peak figure of 14.26 in November.

More Home Helps are required before the area as a whole can be adequately covered. Whilst there is a sufficiency of Home Helps resident in certain areas to fully service these areas there is a scarcity in others, and as travelling time is now no longer paid where this does not exceed one hour per day, several home helps refuse to take cases away from their own immediate district. In spite of this, practically all applications received have had the services of a home help, although the amount of time which could be devoted to any particular case has sometimes been less than was actually required.

During the year 202 cases were provided with home helps as compared with 155 in the previous year. The duration of assistance provided was as follows:—

	13	36	69	Over	
Under I Month N	Ionths	Months	Months	9 Months	Total
				ļ	

Details of the assistance given to the 202 patients in the various categories is shown in the following table:—

Total	Av. No. of hours per Patient	65.21	89.58	136.44	122.17	135.05	839.00	295.31	119.02
	No. of Pat- ients	09	9	52	15	64	_	4	202
Meltham	Av. No. of hours per Patient	65.43	1	83.88	51.00	219.90	1		139.27
Me	No. of Pat- ients	7	1	∞ 	+	13			29
Kirkburton	Av. No. of hours per Patient	47.70	109.33	95.33	260.33	40.30	1		76.47
Kirl	No. of Pat- ients	12	က	က	က	10	1		31
Holmfirth	Av. No. of hours per Patient	56.44	69.50	149.44	81.83	144.33	1	219.00	125.94
Hol	No. of Pat- ients	6	—	18	က	16		1	48
Denby Dale	Av. No. of hours per Patient	68.31	1	261.43	70.50	188.48	1	l	163.06
Denl	No. of Pat- ients	o		7	23	10	ıl	I	27
Colne Valley	Av. No. of hours per Patient	76.15	70.00	100.81	102.33	79.22	839.00	320.75	107.22
Colne	No. of Pat- ients	24	23	16	9	15	-	8	29
	Category	Lying-in	Expectant Mothers	Illness	Aged—Infirm	Aged—III	School Children	Tuberculosis	Total

National Assistance Act, 1948, Section 47.

Under this section a local authority may take action to secure removal to suitable premises of persons in need of care and attention. On the 1st September, 1951, the National Assistance (Amendment) Act, 1951, came into operation. This gives the local authority further powers to enable them to deal expeditiously with certain types of cases whom it is considered should be removed without delay from the premises in which they are resident.

No action was taken under this section during the year.

Ambulance Service.

During the year close co-operation has been maintained with the Superintendent of the Huddersfield Depot and any difficulties of a medical nature arising have been discussed. Cases of abuse of the service are now much less frequent than was the case in the early days of the National Health Service.

The service has worked smoothly throughout the year and complaints have been negligible.

During the year the ambulances from the Huddersheld Depot made 4,920 journeys involving 109,622 miles, and carried 16,936 patients, 2,549 of these being stretcher patients. Included in the 16,936 patients carried were 14,294 hospital out-patients. Particulars of the cases carried are given below:—

Accident					• • •		160
Urgent							182
Mental							28
Maternity	• • •			• • •			145
Infectious General	• • •	• • •		• • •	• • •	• • •	9 194
Out-Patients				• • •	• • •		2,124 14,294
	* * *	* * *	• • •	• • •	* * *	* * *	14,20 4
						1	16,936
						1	

In addition to the ambulances stationed at the Huddersfield Depot an ambulance, the property of the Holmfirth Urban District Council, is operated as part of the County Service. This ambulance is available for accident work in the Holmfirth area, the staff coming on duty when called. During the year the Holmfirth ambulance carried 32 cases and travelled 324 miles.

Several cases were also carried by cars in the Voluntary Car Pool, the journeys being principally to Leeds, Bradford, York, and Doncaster.

CHILDREN'S HOMES

Medical Arrangements.

The care and treatment of children accommodated in The Leas Children's Homes, Scholes, Holmfirth, during times of illness is delegated to a private practitioner with whom the children are registered under the National Health Service Act, 1946.

The Divisional Medical Officer has been made responsible for the preventive medical services of the local authority so far as the children are concerned. Each child is examined by a medical officer of the local authority on admission and at 6 monthly intervals. Advice is given regarding precautions to be taken against the spread of infectious diseases, hours of rest and sleep, and the general supervision of health, hygiene, and dietary of the children.

Cases of difficulty in behaviour, boarding out, etc., are discussed with the Superintendent of the Homes and with the officers of the Children's Department. Visits are also made from time to time by the County Psychologist.

MENTAL HEALTH

The mental health work in the Division consists mainly of the supervision of defectives under voluntary and statutory supervision and under guardianship orders.

The work is done mainly by the Mental Health Social Worker, who also provides reports about the home conditions of defectives for the information of Hospital Management Committees, when applications for leave of absence or renewal of licence are under consideration. The Social Worker also gives a little training in handicrafts of various sorts to suitable patients.

Very little has been done regarding the provision of personal histories and background information relating to patients admitted to and discharged from Mental Hospitals, as this work in the Division is largely done by the Social Worker attached to the local Mental Hospital.

There is great difficulty in securing institutional accommodation for those patients whose mental, physical, or social conditions make this desirable. As the Local Health Authority no longer provides residential accommodation all that can be done is to make recommendations to the Regional Hospital Board.

During the year two children were reported by the Local Education Authority under Section 57 (3) as ineducable and eleven under Section 57 (5) as requiring supervision after leaving school — all were placed under statutory supervision. Two adults were reported by the police or the courts, and six other adults were found "subject to be dealt with." Three adults (female) were admitted to institutions during the year.

At the end of the year the number of patients under supervision was as follows:—

	Male	Female	Total
Under Guardianship	í	2	3
Under Statutory Supervision	41	33	74
On Licence from Institutions	3	2	5
Under Voluntary Supervision and Observation	7	3	10

Of these patients 17 were in need of institutional care at the end of the year as follows:—

	Male	Female	Total
In urgent need	3	2	5
Not in urgent need	8	4	12
Total	11	6	17

The great need of defectives resident at home is facilities for occupational training either at occupation centres or in small groups or individually at home. The siting of occupation centres for the larger scattered Divisions such as No. 20 is very difficult. To serve the whole of this Division the centre would have to be in Huddersfield, but to gather together all the patients from the outlying areas would require the provision of special transport to an extent impracticable at the present time.

The training of smaller groups therefore seems to be the only course open at present. During the year small classes were commenced at Linthwaite and Honley under the supervision of Mrs. M. Moore, the Mental Health Social Worker, the number of patients who attended and the number of attendances made being as follows:—

Centre	No. of Sessions	No. of Patients	No. of Attend- ances	Average No. of Attendances per Session
Linthwaite	24	13	170	7.08
Honley	11	5	37	3.36
	35	18	207	5.91

These classes are much appreciated by the patients and their parents, but hardly touch the fringe of the present need. Until trained Home Teachers are available it is, however, impossible to extend the scope of the work.

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